

**Sibford Gower Endowed Primary School**

**Nursery admissions application form**

An application for a place at the nursery should be made a full term before the start of the term in which you would like your child to start with us. We will confirm an offer of a place half a term before the term in which their place is offered.

Please read in conjunction with our nursery admissions policy.

**Section 1: Your child’s details**

|  |  |
| --- | --- |
| Surname |  |
| First name(s) |  |
| Date of Birth |  |
| Address (including postcode) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Does you child have an Educational Health Care Plan? | YES/NO | If so, please give details. |  |
| Is your child “looked after” or “previously looked after” by a Local Authority? | YES/NO | If so, please give the name of your child’s social worker and the Authority |  |
| Does your child have any older brothers or sisters attending this school? (n/a if currently in year 6) | YES/NO | If so, please give their name, date of birth and current year group. |  |

**Section 2: Application details**

***Your child will be eligible to join the nursery from the start of the term following their 3rd birthday. NB based on the Government eligibility dates with terms starting 1 January, 1 April, 1 September***

|  |  |  |  |
| --- | --- | --- | --- |
| Beginning of which term would you like your child to start nursery? | * Autumn 2022 | * Spring 2023 | * Summer   2023 |
|  | * Autumn 2023 | * Spring 2024 | * Summer 2024 |

*For 15 hours universal entitlement this can be made up of 5 morning sessions or a mixture of morning and all day sessions.*

*For 30 hours extended entitlement this can be made up 5 all day sessions or a mixture of morning and all day if you do not wish to use the full entitlement.*

*Where you do not qualify for extended entitlement but would like to fund additional hours privately you can request up to 30 hours made up of a mixture of all day and morning sessions.*

*Please see below to see the sessions we offer at the Nursery.*

*We are open 5 days a week during term time, Monday to Friday 9am-3pm*

*For non-funded hours we charge £4.50 per hour.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Option |  |  |  |  |  |  |
| 1 | 9am – 12pm (3hrs not including lunch) | | |  |  |  |
| 2 | 9am – 1pm (4hrs children to bring a packed lunch) | | | |  |  |
| 3 | 9am – 3pm (6hrs children to bring a packed lunch) | | | | | |

|  |  |
| --- | --- |
| Please state which options above would you like to register for if they are available? | |
|  |  |
| Monday |  |
| Tuesday |  |
| Wednesday |  |
| Thursday |  |
| Friday |  |

|  |  |
| --- | --- |
| Where you are requesting more than 15 hours, do you qualify for extended entitlement or will they be self funded? (please submit eligibility code if appropriate) |  |

**Section 3: Your details**

|  |  |
| --- | --- |
| Surname |  |
| First name(s) |  |
| Relationship to child |  |
| Home telephone number |  |
| Alternative telephone number |  |
| Email address |  |

**Section 4: Additional information**

Please use this space to provide any additional information you believe to be relevant to this application, including, if you are moving house, the date you intend to move and your new address.

|  |
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|  |

**Section 5: Declaration**

I confirm that all the information given on this form is correct to the best of my knowledge and that any false or deliberately misleading information given on this form could lead to the withdrawal of an offer of a nursery place for my child.

I understand that I am giving my consent that the Warriner Multi Academy Trust can process the information in this form for educational and funding purposes and can share it with other agencies and admissions authorities for educational and funding purposes. This may include sharing data with the County Council for the purposes of funding and determining home to school distance in the case of oversubscription. I understand the Warriner Multi Academy Trust and Oxfordshire County Council will keep this information securely

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |