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|  **EYFS Pre-School Application Form****St Mary’s Catholic Primary School** |
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This form should be read in conjunction with the **Schools EYFS Pre-School Admissions Policy**

This application form can be downloaded from our school website or contact the school office if you require a hard copy. If you cannot attach evidence to this application, you can bring it to the school office to be checked instead.

# Section A: Details about the child

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| **Forename(s):** |  |
| **Surname/Family Name:** |  |
| **Home Address with postcode:** *Where the child normally lives. If you expect to move from this address before starting at the nursery, you must let us know as this may affect your application.*  |  |
| **Date of birth:** |  |
| **Gender:** |  |
| **Is this child in the Care of a Local Authority or was this child in the Care of a Local Authority before immediately being adopted or made the subject of a Child Arrangements Order (CAO) or a Special Guardianship Order (SGO)?**  |  |
| **If yes, which Local Authority? Please tell us the name and contact details of the supporting social worker or agency.**  | **Local Authority:****Social Worker/agency:****Email:****Phone Number:**(Evidence attached / I will bring evidence to the office) |
| **Does the child have an Education, Health, and Care Plan (EHCP), is undergoing a statutory assessment, receive Disability Living Allowance or have a disability?** | **No****Yes** (Evidence attached / I will bring evidence to the office) |

# Section B: Details about you

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| **Forename(s):** |  |
| **Surname/Family Name:** |  |
| **Home address and postcode (if different from your child’s):** |  |
| **Daytime telephone number:** |  |
| **Email address:** |  |
| **What is your relationship to this child?** | e.g., Mum, Dad, Foster Carer |
| **Do you have parental responsibility (PR) for this child?** | **No** (I have attached evidence that someone with PR is happy for me to make the application on their behalf.)**Yes** |
| **Is this child subject to a private fostering arrangement?**  | **No****Yes** (Evidence attached / I will bring evidence to the office) |
| **Is there a court order in place that might affect this application?**  | **No****Yes** (Evidence attached / I will bring evidence to the office) |

# Section C

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| **When would you like your child to start?**You may be able to start immediately if you have moved into the area or if you have just become eligible for funding and we have places available. | [ ]  **Autumn Term (September)**[ ]  **Spring Term (January)**[ ]  **Summer Term (April)**[ ]  **Immediately** |
| **Is the child eligible for a Free School Meal?** | **Yes** (Evidence attached / I will bring evidence to the office)**No** |
| **Is the child eligible for Early Years Pupil Premium funding?** (3- and 4-year-olds only) | **Yes****No****Don’t know** |
| **Do you want to split your funded entitlement between two different providers?** | **Yes****No****Don’t know** |
| **Does the child already attend a childcare provider?**  | **Yes****No** |
| **If yes, which provider/s and will the child continue to attend that/those provisions if offered a place?**  |  |

**State the times when you wish to attend. This will not impact on whether a place is available. Please choose from the sessions that we offer** **in the box below.**

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| **Our ‘offer’ is:** | Morning 8.45am - 12.00pm | Afternoon12.00pm -3.15pm | All Day8.45am - 3.15pm |
| **Monday** |  |  |  |
| **Tuesday** |  |  |  |
| **Wednesday** |  |  |  |
| **Thursday** |  |  |  |
| **Friday** |  |  |  |

# Section D

# Declaration and Signature

* I understand I must inform the school if this child’s circumstances change before admission.
* I understand that it is my responsibility to provide supporting evidence if the child has an Exceptional Need. Documentary evidence will be required if the child is adopted, has a CAO or a SGO or an ECHP. If the child is undergoing an assessment for an EHCP or if the child has a disability, evidence will be required or is in receipt of DLA. If there is a Court Order that relates to the child, a private fostering arrangement, eligibility for a free school meal, or Early Years Pupil Premium.
* I have read or, had the opportunity to read, the schools EYFS Pre School Admissions Policy I understand that I can contact the school to resolve any queries throughout the application process.

**I confirm that the details provided are accurate:**

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| **Applicant’s signature:** |  |
| **Date:** |  |

Please return this completed form to the school office.