TUPTON PRIMARY & NURSERY ACADEMY™

Headteacher: Miss Katherine Richards
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Tel: 01246 862191
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Tupton Nursery Application Form

Please fill in this application form with block capital letters.

Child's Details:

Child's First name		**Child's Surname:**	
Date of birth:		**Gender**	Male / Female
Country of birth		**Nationality**	
Address	**Postcode:**		
Preferred choice of name if applicable:			
Position of child in the family	**1st 2nd 3rd 4th 5th 6th 7th 8th (please circle relevant number)**		
Please state the other child/ children's names in the family and their date of births			
Name of any siblings that attend Tupton Nursery:		**Names of any sibling that attend Tupton Primary & Nursery Academy:**	
Has your child attended any other setting previously? If so please state where and for how long. For example: childminder, toddler group etc			

Do you intend you child to attend the full 15 hours funded session at Tupton Nursery?	**Yes / No**	**If no, please state which other additional setting:**	**Number of Hours:**
Are you eligible for 30hrs funding? (https://www.gov.uk/30-hours-free-childcare)	**Yes / No**	**If yes, would you be looking at your child attending 30hrs?**	**Yes / No**

Family GP and Doctor Surgery Address	
Any health concerns:	
Does your child have a Statement or an Educational Health Care Plan?	**Yes** **No** **(Please Circle)**
Is this child in care?	**Yes** **No** **(Please Circle)**
Does this child have safeguarding plan?	**Yes** **No** **(Please Circle)**
Are there any agencies involved with the child or family? E.g. Paediatrician, Social Care, Speech and Language Therapist or Family Resources Worker)	
Please state the school you intend to send your child:	

First Parent/ Guardian Information Living at Home Address Above:

Title		**First name**	
Surname		**Relationship to child:**	
Parental Responsibility?	**Yes/ No**	**Home Telephone Number:**	
Mobile Number		**Work Number**	
Place of Work if applicable			
Email address			

Second Parent/ Guardian Information:

Title		**First name**	
Surname		**Relationship to child:**	
Parental Responsibility?	**Yes/ No**	**Home Telephone Number:**	
Mobile Number		**Work Number**	
Place of Work if applicable		**Address if different to the child's home address**	

Any Other Notes or Information For example: court orders, custody agreements and contact arrangement

Admission criteria:

1. Looked after children and children who were looked after but ceased to be so because they were adopted (or became subject to a residence order or special guardianship order). This includes children who appear (to the admission authority) to have been in state care outside of England and ceased to be in state care as a result of being adopted.
2. Children living in the normal area served by the school at the time of application and admission who have brothers or sisters attending the school at the time of application and admission.
3. Children living in the normal area served by the school at the time of application and admission.
4. Children not living in the normal area served by the school but who have brothers or sisters attending the school at the time of application and admission.
5. Other children whose parents have requested a place.

Where, in the case of 2, 3, 4, or 5, choices have to be made between children satisfying the same criteria, those children living nearest to the school measured by the straight line distance will be given preference. Further information regarding normal area can be found on the Derbyshire County Council's normal area schools web page.

Parent/ Guardian signature: ……..…… **Date:**……..……

Print name: ……..…….

PLESE INFORM US IF YOU LEAVE THE AREA OR NO LONGER REQUIRE A PLACE IN OUR NURSERY.

COMPLETION OF THIS FORM DOES NOT GUARANTEE A PLACE AT NURSERY.

The information which you entre on this form is required for the efficient organisation of the school and the children's educational needs. It will keep on the office computer under restricted access and is subject to the provisions of the Data Protection Act. The information will be disclosed only to the Education Authority, the Health and Welfare agencies or where a law of an emergency necessitates a disclosure. The information held must be kept up to date by law and so if any of the information which you supply changes in the future, will you please notify the school or ask for another form.

Office use only:	**Date**	**Initials**
Application received		
Information inputted into RM Integris		
Application form passed to EYFS Co-ordinator		
Application form received back to office and filed in nursery folder		