Saxon Primary School
NURSERY APPLICATION FORM

Please complete as fully as possible

PUPIL INFORMATION			
Legal Surname	**Legal Forename**	**Middle Name**	**Gender**
			Male/ Female
Preferred Surname	**Preferred Forename**	**Date of Birth ***	***on acceptance of a nursery place, the school will need to see a photocopy of the birth certificate**

PARENT/GUARDIAN INFORMATION			
Please give full name and titles of person(s) to whom all correspondence should be addressed. Proof of address may be required in the form of Child Benefit payment correspondence.		Please give full name and titles of person(s) **with parental responsibility** to whom duplicate copies of school information should be sent (if applicable).	
Full Name:		Full Name:	
*Address:		*Address:	
Postcode:		Postcode:	
Home Tel Number:		Home Tel Number:	
Mobile Number:		Mobile Number:	
Email Address:		Email Address:	
Relationship to Child:		Relationship to Child:	
***Note: if parents no longer live together please indicate which is the child's primary address**			

INFORMATION TO HELP US CORRECTLY PROCESS YOUR CHILD'S APPLICATION

Under which admissions criteria are you applying for a nursery placement? Please tick as appropriate.

Please note if a box is not selected your child will be prioritised according to admission priority "distance" as below.

Tick		Additional information required
	Looked after and previously looked after children	please provide Legal Documents to school office
	Children of staff at Saxon Primary School	Name of Child:
	Children who will have a sibling attending the nursery or the school at the time of admission	Name of sibling:
	Early Learning for 2 year olds (formally known as FEET Funding) **(please confirm your eligibility code)**	Code:
	Working parent eligibility for 2/3 year olds **(please confirm your eligibility code)**	Code:
	Distance	N/A

Please state your preference as to which session you would like your child to attend by placing an 'X' in the appropriate box below:

Note: preferences cannot be guaranteed as sessions are allocated subject to availability which may result in your child being offered a place at either one of the session options outlined below:

1. **Woodpeckers class** - Monday & Tuesday, 8:30am–3:00pm and Wednesday, 8:30am-12:00pm	
2. **Kingfishers class** - Wednesday, 12.15pm–3.00pm, Thursday & Friday, 8:30am – 3:00pm	
3. **Either** session is fine	

We normally have 3 intakes per academic year. Please indicate your preferred start date - January, April or September and year. *E.g. Jan 2025.* **Places are subject to availability & we will not be able to guarantee a place can be offered for your preferred start date.*	
Please state whether you are interested in a 2-year-old or 3-year-old place:	❑ 2-year-old place (Early Learning funded (formally FEET Funding) – 15 hours only ❑ 2-year-old paying place (15 hours - £141 per week ❑ 2-year old funded place (15 hours only Working Parents' entitlement) ❑ 3-year old place (funded)
Please state if you are interested in 5 full days per week (30 hours) either as a funded or self-funding place at 3 years old. *Please note that 30-hour places are not guaranteed and subject to availability*	❑ I am eligible for 30 hours funding (for 3-4 yr olds only) ❑ I would be interested in paying for the additional 2.5 days per week (£96.30) (for 3-4 yr olds only)

Any other useful information you feel the nursery would find relevant at this stage including details of external agencies involvement e.g. speech and language

PREVIOUS NURSERY INFORMATION (IF APPLICABLE)	
Name of current nursery	
Address of nursery	
Telephone number	
Dates attended	**From:** **To:**

Please return to the school office when completed. We will confirm receipt of your application by email.
Places for a new academic term will be offered by the previous half term – e.g. September places will be allocated by May half term. We will contact you when a place becomes available.

FOR OFFICE USE ONLY		
Offer made	**Induction date**	**Start date**