

**Application for a place in Nursery in 2024**

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| **For school use only** |
| **Date application form received** |  |
| **Distance from child's home to nursery** |  |

**Please complete this form in black ink and block capitals and return it, along with any supporting evidence, to the school office by:**

**Friday** **23rd February 2024**

Please read the notes set out below and our nursery admissions policy (available from the school website, [bayford.herts.sch.uk](https://bayuford.herts.sch.uk/), or the school office) before completing the form, and contact us if you need any help or advice.

**Notes**

We expect **all** children to attend at least **all** morning sessions (8:45 am to 11:45 am, Monday to Friday in term time, a total of 15 hours per week).

We also offer afternoon sessions (11:45 am to 3:15 pm, Monday to Friday in term time). All children admitted to nursery may take regular afternoon sessions, arranged term by term. We will discuss your requirements, including lunch arrangements, if the child is offered a place in nursery.

By completing this form and signing the declaration you are agreeing that Bayford School, if oversubscribed, may check whether the child’s details meet the school’s published admission rules and if he/she can be offered a nursery place.

Bayford Primary School and Nursery is the data controller under the General Data Protection Regulations. Any personal data collected will be treated as confidential. We will not use the data for any purpose other than processing this application, nor will we share your data with any third parties other than the Department for Education (for statutory reporting), Hertfordshire County Council departments who may from time to time send you advice, guidance and information relating to changes to early years provision and educational services that are relevant and/or of benefit to the child, and your local children’s centre who support the local authority by assisting families to access the services that children are entitled to.

**Children who have been adopted from care or are subject to a special guardianship order or a child arrangements order**

Eligibility will be based on your declaration that the child was formally a looked after child and on the evidence of their status e.g. a copy of the relevant order. This form and a copy of the relevant order should be seen by the school and we will confirm with Hertfordshire County Council that we have seen confirmation and enable a place to be offered under this criterion.

**1) About the child**

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| **Child's first name(s)** |  |
| **Child's middle name(s) if any** |  |
| **Child's family name(s)** |  |
| **Child's date of birth** | **Day** | **Month** | **Year** |
| **Child's gender** *(please tick)* | **Boy** | **Girl** |
| **Child's NHS Number** |  |
| **Does the child have an education, health and care plan (EHC plan or EHCP)?** *(please tick)* | **Yes** | **No** |
| **Does the child have a Statement of Special Educational Needs?** *(please tick)* | **Yes** | **No** |
| **Is the child 'looked after' (in public care)?**Or previously looked after and now adopted, or with a child arrangements or special guardianship order?*(please tick and give further information below)* | **Yes** | **No** |
| **Is the child, or a sibling/other child of the same household, the subject of an inter-agency child protection plan and has been placed on the Child Protection Register?** *(please tick and give information below)* | **Yes** | **No** |
| **Does the child have a medical or social need to attend this nursery?** *(please tick and give evidence below)* | **Yes** | **No** |
| **Does the child have a brother, sister or another child of the same household who already attends the nursery or Bayford School?** | **Yes** | **No** |
| **If 'yes', please give the name(s) and date(s) or birth of the child(ren)** |  |
| **Is the child currently attending a nursery/playgroup/crèche?** *(please tick)* | **Yes** | **No** |
| **If 'yes', please give the name of the nursery/playgroup/crèche** |  |
| **Child's permanent address***This should be the address where the child is living at the time of making the application.* **Please include postcode.** | ..........................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................Postcode....................................... |

**2) About the parents or carers**

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| **Parent or carer 1** |
| **Parent/carer's first name(s)** |  |
| **Parent/carer's family name(s)** |  |
| **Parent/carer's preferred title**(for example, Mr, Ms, Mrs etc.) |  |
| **Relationship to the child***(for example: mother/father carer/stepmother/stepfather or social worker)* |  |
| **Parent/carer's email address** |  |
| **Parent/carer's telephone number(s)** *(mobile and/or landline; please give a number we can use to contact you in the daytime)* |  |

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| **Parent or carer 2 (if applicable)** |
| **Parent/carer's first name(s)** |  |
| **Parent/carer's family name(s)** |  |
| **Parent/carer's preferred title**(for example, Mr, Ms, Mrs etc.) |  |
| **Relationship to the child***(for example: mother/father/ carer/stepmother/stepfather or social worker)* |  |
| **Parent/carer's email address** |  |
| **Parent/carer's telephone number(s)** *(mobile and/or landline; please give a number we can use to contact you in the daytime)* |  |

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| **Refugees or asylum seekers** |
| **Is either parent/carer a refugee or seeking asylum in the United Kingdom?** *(please tick)* | **Yes** | **No** |
| **If 'yes', please give the National Asylum Support Service (NASS) number(s)** | **Parent/carer 1****Parent/carer 2** |

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| **Free child care** |
| **Will you be using any free child care entitlement for sessions in our nursery?** *(please tick)* | **Yes** | **No** |
| **If 'yes', please give your HMRC code** |  |
| **If 'yes', please give your National Insurance number(s)** | **Parent/carer 1****Parent/carer 2** |

**DECLARATION**

The information I have given on this form is complete and accurate. I understand that my personal information will be held securely and will be used only for the school's lawful purposes in processing this application.

I agree to Bayford School using this information to consider my application for a nursery place. I understand that if any part of this completed application form is found to be false the offer of a place will be withdrawn.

I understand that the completion of an application form does not guarantee a place in the nursery class.

I understand that, if offered a place in the nursery class, I will have to apply separately for a place in Reception to the local education authority.

**Signed Parent/Carer 1............................................................................Date...........................................**

**Signed Parent/Carer 2............................................................................Date...........................................**

**Please complete and return this form to the school office by Friday 23rd February 2024.**

**Additional information**

Please provide additional information here about:

* any developmental, health or physical needs (including disabilities) which the child may have
* any exceptional medical, social or other reasons why the child should attend this nursery (supported by written, specific professional advice e.g. a letter from a doctor or social worker)
* any information relating to an EHC plan or inter-agency child protection plan
* for a child who is looked after, information about the relevant local authority and the name and contact details of the child's social worker, if not provided above
* anything else which it might be helpful for us to know