**Application for a Nursery Place**

**Date of application**

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| **Child’s Details:** | | | | | | | | |
| Child’s Full Name: | | | | | Child’s DOB: | | | |
| **Child’s Address:** | | | | | Postcode: | | | |
| Parent 1:  **DOB:**  **NI:** | | | | | Parent 2:  **DOB:**  **NI:** | | | |
| **Contact Telephone Numbers:** | | | | | | | | |
| Home:  Parent 1 Mobile:  E-mail address: | | | | | Home:  Parent 2 Mobile:  E-mail address: | | | |
| Address (If different): | | | | Address (If different): | | | | |
| **Should your contact details change please inform us immediately** | | | | | | | | |
| **Are you a member of a service family?** YES/ NO | | | | | | | | |
| **Hours Required: Preferred start date:** | | | | | | | | |
| **Monday** | **Breakfast**  8-9am | 9am-3pm | 9am-12pm | | | 12-3pm | 3-4pm | **Tea club**  4-5:15pm |
| **Tuesday** | **Breakfast**  8-9am | 9am-3pm | 9am-12pm | | | 12-3pm | 3-4pm | **Tea club**  4-5:15pm |
| **Wednesday** | **Breakfast**  8-9am | 9am-3pm | 9am-12pm | | | 12-3pm | 3-4pm | **Tea club**  4-5:15pm |
| **Thursday** | **Breakfast**  8-9am | 9am-3pm | 9am-12pm | | | 12-3pm | 3-4pm | **Tea club**  4-5:15pm |
| **Friday** | **Breakfast**  8-9am | 9am-3pm | 9am-12pm | | | 12-3pm | 3-4pm | |
| **Does your child have any additional health or education needs?** | | | | | | | | |
| **Is your child under any outside professional?** For example, Speech and Language, Paediatrician, Children’s Centre etc. | | | | | | | | |
| **Name** and **Address** of any childcare setting your child is currently attending  Postcode | | | | | | | | |
| **Parents’ Signature** | | | | | | | | |

**Please complete form and return in person or by e-mail to the setting of your choice.**

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For office use only

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| DATE | CONTACT MADE | SPACE OFFERED | COMMENTS |
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| SETTLING BOOKED | PACK GIVEN | FORMS RECEIVED | START DATE AGREED |
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