

**Legal Surname** 

Relationship to

Child:

## Walton Oak Primary School NURSERY APPLICATION FORM

Please complete as fully as possible

**PUPIL INFORMATION** 

**Middle Name** 

Gender

**Legal Forename** 

					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 ti			Please give full name and titles of person(s) with parental		
correspondence should be addressed. Proof of address may be		responsibility to whom duplicate copies of school information should			
required in the form of Chil	a Benet	it payment correspondence.	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:	_	

## INFORMATION TO HELP US CORRECTLY PROCESS YOUR CHILD'S APPLICATION

\*Note: if parents no longer live together please indicate which is the child's primary address

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	Legal documents
	Children of staff at Walton Oak Primary School	
	Children who will have a sibling attending the nursery or the school at the time of admission	Name of sibling;
	Distance	N/A

Relationship to

Child:

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:

	•	
	ndybirds class - Wednesday, 12.15pm – 3.15pm, nursday & Friday, 8.45am – 3.15pm	
3. Eit	ther session is fine	

We normally have 3 intakes per academic year.	
Please indicate your preferred start date - January, April or September and	
year. <i>E.g. Jan 2025.</i>	
*Places are subject to availability & we will not be able to guarantee a	
place can be offered for your preferred start date.	
I am applying for a 15 hours funded 3-year-old place:	☐ 3 year old place (funded)
Please state if you are interested in 5 full days per week (30 hours) either as	☐ I am eligible for 30 hours funding
a funded or self-funding place at 3 years old.	$\square$ I would be interested in paying for the
*Please note that 30-hour places are not guaranteed and subject to	additional 2.5 days per week (£91.50)
availability*	,,,,,

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

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

**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