To be considered in the initial allocation of nursery place this form should be returned to Highfield South Farnham School as soon as possible.

- Please note that completing this form does not guarantee a place.
- Governors will consider applications received by the deadline date in accordance with the nursery class admission policy.
- Please read the nursery admissions policy before completing this form.
- Please fill in the form in block capitals then sign it.
- You will be notified by the school if your child has been allocated a place.
- Please contact the school if you have any questions concerning completion of this form.

## 1. Child's Details

Child's Last Name:							
Child's First & Middle Name:							
Child's Date of Birth:	/	Gender:	Male / Female				
Child's Home Address: (this must be the child's normal place of residence and not a relative's or carer's address)							
,		Po	stcode:				
Looked After and I     (if the child is in publice)	criterion you are applying for a nurse Previously Looked After Children care of a Local Authority or has provide evidence with your form):	,					
2. Where there is a social or medical need for a place at the nursery school (E.g. does your child have any special education needs, special social needs or a disability? Are they supported by Social Services, a Speech Therapist, Educational Psychologist, Portage or Child and Family Guidance? An application will not be considered under this criterion unless independent evidence is provided. As such, please provide further details together with any relevant documentation)							

Parents'/Guardians'/	Carers' De	<u>tails</u>			
Title:	Mr / Mrs / Miss / Ms /		Mr / Mrs / Miss / Ms /		
Last Name:					
First Name:					
Relationship to Child:	Parent / Someon / Someon / Relative* *Please pr	ather / Step Parent / Foster ocial Worker / Other family Other Contact*/ Other ovide details	Mother / Father / Step Parent / Foster Parent / Social Worker / Other family member / Other Contact* / Other Relative* *Please provide details		
Occupation:					
Address: (if different from that of the child given overleaf)		Postcode:	Postcode:		
Daytime telephone number:					
Mobile telephone number:					
Email address:					
Name and ages of all brothers and sisters (if any), including stepbrothers and sisters living in the same family unit.		Name: 1	Age:		
		_			

3. Where a child is expected to have a sibling attending the nursery or the main school at the

Please provide the name(s) and date(s) of birth of sibling(s) below:

time of admission

Please state if sibling will be attending this school at the	If yes, current name and class						
date of admission for the applicant.	Name: Class:						
арриоши.	1						
	2						
	3						
	0						
Is there any additional information you would like to share?							
The nursery operates sessions	Preferenc	<u>e</u> :					
throughout the week. Our core hours run from 9am-3pm	Mon	Tues	Wed	Thurs	Fri		
Monday to Friday. We then	AM	AM	AM	AM	AM		
offer additional breakfast	Mon	Tues	Wed	Thurs	Fri		
(7:45-9:00) and afterschool club (3:00pm-6:00pm). We	PM	PM	PM	PM	PM		
operate with an 18 hour	Mon	Tues	Wed	Thurs	Fri		
minimal week, (at least 6	BC	BC	BC	BC	BC		
boxes need to be ticked).	Mon ASC	Tues ASC	Wed ASC	Thurs ASC	Fri ASC		
If your child attends a full day	700	AGG	700	700	1,00		
they will stay for lunch. We	Schoo	l Packed					
offer school dinners at a	Dinne	r Lunch					
charge of £2.30 or alternatively							
your child can bring a packed lunch. Please tick the							
appropriate box							
When is my child entitled to Nurs	-	_					
after their third birthday. Extended		•	-	oe charged acc	ording to our		
Nursery tariff. Please complete an	addition for	m to apply for e	xtra hours.				
4. Parent/Carer Declaration and signature of Parent/Carer:							
I wish to apply for a place atand I have indicated the criterion under which I am applying							
for that place. I certify that I am the person with parental responsibility for the child named in Section 1 and							
that the information given is true to the best of my knowledge and belief. I understand that if I give any false or deliberately misleading information on this form and/or supporting documents, or withhold any							
relevant information, this may lead to the withdrawal of an offer of a nursery school place for my child. I understand that the school reserves the right to amend its provision of nursery.							
Highfield South Farnham School is compliant with the General Data Protection Regulation which means we							
seek your specific consent to use the data we are collecting within this Admissions Form for the purposes							
as detailed within the Privacy Policy on the School website. We request that you sign this form to confirm that you are giving us your specific consent for the use of this data for the specific purposes outlined							
that you are giving us your specific consent for the use of this data for the specific purposes outlined.							

Date:

Signature of Parent/carer: