Nursery Application form

Please complete both sides of this form and return to the school office.

**Child's details Date of application:**

|  |  |
| --- | --- |
| **Surname:** | **Date of Birth:** |
| **Forename:** | **Male / Female (circle as appropriate)** |
| **Current Address:**  **Postcode:** | |

**Mother’s details**

|  |  |
| --- | --- |
| **Surname:** | **Mrs / Miss / Ms / other (circle as appropriate)** |
| **Forename:** | **Telephone number:** |
| **Current Address:**  **(if different from the child’s)**  **Postcode:** | |
| **Email address:** | |

**Father’s details**

|  |  |
| --- | --- |
| **Surname:** | **Mr / other (circle as appropriate)** |
| **Forename:** | **Telephone number:** |
| **Current Address:**  **(if different from the child’s)**  **Postcode:** | |
| **Email address:** | |
| **Anything we need to know about your child (medical, diet, etc)** | |

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| **Please attach copies of your child’s Birth certificate and Baptism certificate (if applicable)**  **Please tick the box beside the category into which your child falls:**  [ ] a) Roman Catholic living in St Theresa’s Parish.  [ ] b) Roman Catholic from another Parish and already has a brother or sister in St Theresa’s at the time of application.  [ ] c) Roman Catholic from another Catholic Parish.  [ ] d) Child with a brother or sister in St Theresa’s at the time of application.  [ ] e) Child of parents wishing him/her to attend St Theresa’s for genuine religious reasons.  [ ] f) Not in any of the above categories.  If your child is in either category e) or f), please write a few words below in support of your application e.g. any personal or domestic circumstances which you consider relevant to your choice. |

**Admission to St Theresa’s Nursery does not necessarily guarantee admission to the Primary School. You will be contacted by Cheshire West and Chester Council and required to complete the necessary application forms for school (please ask a member of the office staff for further information).**

**All children are entitled to 15 hours Nursery provision each week during the school year. Please indicate if you require: 15 hours or 30 hours\* (\*30 hours entitlement is dependent on circumstances. Please ask for more information).**

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| I declare that all the information which I have provided is true. I understand that any Nursery place offered on the basis of fraudulent or intentionally misleading information may be withdrawn. | |
| **Signed:** | **Mr/Mrs/Miss/Ms/Dr etc** |
| **Print name:** | **Date:** |

**Please return this form to the school office.**

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| --- | --- |
| Office Use Only | |
| Birth Certificate produced: Yes/No | Baptism Certificate produced: Yes/No |
| Term and Year child due to start school | Letter sent to parents acknowledging application? Yes/No |