



Nursery Application form

About Your Child



Child's Forename	Child's Surname
Child's Middle Name	Legal Surname
Male / Female	Date of Birth
Place of birth	Refugee status
Country of birth	Nationality
Home Address	Does the child live with both parents?
Do both parents have parental responsibility?	Names and ages of any siblings already attending Latymer All Saints Primary.





Family Information



Religion	Ethnicity
Languages spoken at home	Child's 1st language
Does your child speak English?	Does your child understand English?



Doctor's Information	
Name	
Address	
Postcode	
Telephone Number	





Mother's/Guardians Details Fathers'/Guardians Details

Name	Name
Address (if different from above)	Address (if different from above)
Telephone Number Home	Telephone Number Home
Mobile	Mobile
Telephone Number Work	Telephone Number Work
Email address	Email address





Emergency Contact Details



In the event of us not being able to contact parents/ guardians in an emergency, please enter below the name, address and telephone number of alternative contacts.

Name	Name
Address	Address
Telephone Number Home	Telephone Number Home
Mobile	Mobile
Telephone Number Work	Telephone Number Work



At the end of the day my child may be collected by :

Name	Name
Relationship to child (parent/carer/childminder/ relative /family friend)	Relationship to child (parent/carer/childminder/ relative /family friend)
Telephone Number Home	Telephone Number Home
Mobile	Mobile

Please keep us informed as to the identity of the persons who will be collecting your child from nursery. If the person collecting your child is not usually responsible for collecting them we will require proof of identity using a password. If we are not reasonably satisfied that an individual is allowed to collect your child, we will not release your child into their care.

Password: _____

Sessions



Session Required (please tick only one box)	
Mornings (8.30-11.30AM)	
Afternoons (12.30-3.30PM)	
Full time (30 Hours) Monday -Friday 9.00AM-3.00PM This is funded and for working parent (s) only.	
I require more information about 30 Hours (Y/N) I have a 30 Hour code _____ 30 hour children will need to bring in a packed lunch to nursery.	

Has your child	Yes	No	Details:
Attended another Nursery or Pre-school			

When would you like your child to start Nursery	Are you willing to go on a waiting list?
Month _____ Year _____	Yes /No





People my child already knows at
Nursery.

Places and things my child likes to go to, talk
about, do or explore.



How I comfort and
reassure my child.

Things which can upset, frighten
or worry my child.



Starting at Nursery



How does your child separate from you?

Has your child had any experience of the any of the following activities?

	Water play		Sand play
	painting		Drawing
	Play dough		Model making
	Dressing up		Computer
	Cutting/sticking		Singing
	Stories		Puzzles
	Construction		Games

What experience does your child have of playing with other children?



Is there anything else you would like us to know or are concerned about?

Please tell us about any significant events or experiences your child may have had.





Everyday things

How does your child make their needs known?

Which objects or things soothe or calm your child?

What help will your child need at snack time?

What kind of cup does your child use?

What stage of toilet training is your child at?

How does your child tell you they need the toilet?





Health Information



Child's name:

Does your child	Yes	No	Details:
Have any allergies?			
Have an epipen?			
Have any on-going health issues? for example asthma			
Have a medical condition?			
Have or need a Health Care Plan?			
Has your child had any major illness, operation, hospital stay?			
Are you concerned about any aspect of your child's health?			
Does your child have any special dietary requirements?			

Has your child had the following immunisations	Yes	No
Whooping cough		
Diphtheria		
Tetanus		
Measles		
Mumps		
Rubella		
Polio		
Hib Meningitis		





Additional Information

In which area(s) does your child have additional needs? Please tick the following and add any notes you think may be helpful to us. This information will not effect your application.	Yes	No
Speech (for example: articulation)		
Language (for example: using or understanding language)		
Emotional and/or behavioural		
Hearing		
Sight		
Physical movement(for example: running, climbing stairs)		
Please provide any reports/further information if your child has been seen by Speech & Language/Paediatrician/Educational Psychologist/Doctor or any other health care professional.		

	Yes	No
Has your child had their 2yr old progress check at another setting?		
Has your child had their 2yr old health check?		
Would you be willing to share this information with staff?		



Does your child have any of the following?	Yes	No
A Speech & Language referral / report		
Educational Health & Care Plan (EHCP) ?		
Enfield Early Help Form (EEHF)		



Consent



Photographs / Video

On occasions we may like to include a photograph, image, work example or video recording for electronic (website or blog) and printed information, displays and exhibitions. The image used will only relate to the activity shown in the picture, and will not be used for anything which may be viewed as negative in tone or that may cause offence, embarrassment or distress for the child or their parent or guardian. In order to include a photograph or image we require your written consent.

Plasters

Some children are allergic to plasters and we therefore require parents to give their permission for staff to use plasters in the case of an accident to their child.

Local Trips

As part of early learning planning, the nursery will arrange local visits and walks in the local area to support children's knowledge, understanding and experiences. For example, they could learn about different kinds of food and cooking ingredients during a trip to a supermarket, or collect objects of interest for a collage or table display during a walk in the park.

For your child to take part in such activities we require written permission from you as parent/carers. All outings away from the nursery will be assessed to identify risks and measures will be put in place to ensure children, staff and assistants are safe during their time away from the nursery. Adult to child ratios will be higher than normal on these occasions and we would welcome and appreciate any parents who would feel able to accompany us on short walks and trips.

Please note that separate letters and permission slips will be sent out for visits and trips further afield.

	Yes	No
I give permission for my child's photograph to be used in the school Prospectus and other printed publications that we produce for promotion purposes.		
I give permission for my child's photograph to be used in local and/or national media.		
I give permission for my child's photograph to be used in the school newsletter.		
I give permission for my child's photograph to be used on the school website.		
I give permission for my child to go on local visits. Local visits within the 'school learning area' covered by this consent includes visits to the local area during the school day which are part of the school's curriculum. E.g All saints Church, Pymmes Park etc (the local area is designated as any location up to 30 minutes walking distance from the school.)		
Plasters		

Print name _____ Relationship to child _____

Signed _____ Date _____



Proofs of Date of Birth, Proof of Address & Proof of Parent Identification

- Two Proofs of address this can include UK Driving Licence, Council Tax notification, child's medical card, a utility bill, less than 3 months old, mortgage or rent agreement
- Please provide the original long copy of your child's Birth Certificate as proof of Date of Birth
- Documentary proof of parent identification, e.g Passport or Driving Licence



Office Use Only	Yes	No
Proof date of birth		
Consent		
Password		
Home Visit		
Start date		

Early Years Pupil Premium



Early Years Pupil Premium Registration

About this form

Since April 2015 all early years providers who deliver Government funded early education are able to claim the Early Years Pupil Premium (EYPP) for three and four year of children. If your child is eligible, the EYPP will provide your child's school with extra funding to enhance the opportunities, experiences and the support offered to your child. We need information about you and your child to provide the best education and support by making sure we receive all the government funding to which the school and your child are entitled.

What makes you eligible?

Children will be eligible if they are 3 or 4 years old, receiving Free Early Education Entitlement with any OFSTED registered childcare provider and their parent(s)/carer(s) are in receipt of one of the following benefits:

- Universal Credit with an annual net earned income of **no more than £7,400**
- Income Support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- the guaranteed element of State Pension Credit
- Child Tax Credit (provided you are not also entitled to Working Tax Credit) and have an annual gross income as assessed by HM Revenue and Customs of no more than £16,190.

Or if they have been:

- Looked after by the local authority for 1 day or more in England or Wales
- Have been adopted from care in England or Wales
- Have left care through a special guardianship order or a child arrangement order in England or Wales

Registering could result in extra funding for your child's early years provider

Registering could provide up to an extra £300 for your child's nursery, pre-school or child minder to fund valuable support like extra training or resources to help raise the quality of your child's early education.

Early Years Pupil Premium Registration

We need information about you and your child, to make sure we receive all the government funding (the Early Years Pupil Premium) to which the school and your child are entitled. Please complete this form and return to your child's school. If you require any assistance completing this form, please ask at your child's school.

Please complete all sections in BLOCK CAPITALS.

Information about your child/children

Child Details:

Child's Last Name	Child's First Name	Date of Birth (DD/MM/YYYY)	Name of Nursery School

Information about you – The information you provide in this form will be used by Enfield Council to check for eligibility to claim additional grant money (the Early Years Pupil Premium) from central government. It will be used for no other purpose and will remain confidential.

Parent(s)/Carer(s) Details: If two people are maintaining a household, details are required from **BOTH** people.

Title	Parent/Carer Surname	Parent/Carer First Name	Date of Birth (DD/MM/YYYY)	National Insurance Number or NASS Reference Number.									

Address:

Postcode:

Telephone No. **Email:**

Please state your relationship to the child named above, for example Mother/Father/Carer etc.

Declaration to be signed by both Parent(s)/Carer(s) (as applicable)

I/We confirm that the information given in this form is complete and accurate. I/We give permission to verify my/our registration for Early Years Pupil Premium through the Department of Education's Eligibility Checking Service.

I/We understand that my/our personal information is held securely and will be used only for local authority purposes.

I/We agree to the local authority using this information to enable my child's school to claim the Early Years Pupil Premium for my child/children.

Signed: **Signed:** **Date:**

FOR OFFICE USE ONLY			
ECS Date Checked:	Eligible for EYPP	NOT Eligible for EYPP	Initials: