## **Puffins**

## **Application form**



You must make a separate application for a school place

Child's Surname	Date of birth:							
Child's Farmana								
Child's Forenames	Male/Female*							
	Maley i cinaic							
Home Address:								
Tel. No Home Mobile	e							
Frankl Address	Talanhana							
Email Address								
riist Farenty Carer's Name - Farent nying at same address as t	.iiiu							
Second Parent/Carer's Name								
Second Parent/Carer's Address - if different from above								
<b>-1</b>								
Tel. No Home	Mobile							
Email Address	Work Telephone							
Please ensure your child's original birth certificate and your Co	ouncil Tax statement accompany this application							
form. Those will be returned to you								

Please indicate the 5 sessions that your child would prefer by placing a (X) in the table below and by writing top-up in any additional box that you would also like.

Top-up sessions cost £4.50/hour (as at 01/09/2020) and are in addition to your free sessions. NB the top up cost is subject to change and is in line with the Bracknell Forest funding rate.

Date	Mon	Mon	Tues	Tues	Wed	Wed	Thurs	Thurs	Fri	Fri		
	9-12	12-3	9-12	12-3	9-12	12-3	9-12	12-3	9-12	12-3		
Sessions												
Is the child Looked After by (in the care of) the Local Authority  Y/N*												
If yes please name the Local Authority												
Does your child have special educational needs?  Y/N*												
It may be helpful to consider whether your child has difficulty in any of these areas:												
Communication, learning, behavioural, emotional and social development, or physical development												
···												
<b></b>												
If your child does have any difficulties in the above areas , please name any other agencies involved with your child												
The school is required by law to take disability into account in relation to the nursery admission process and the arrangements it makes for disabled pupils and potential pupils. This is so to avoid any child being discriminated against on the grounds of their disability in the allocation of nursery places or in the arrangements that are made within the nursery to provide for a child's disability. If you think that your child has a disability, please give full details of the disability and attach any supporting documentation to this application form. This can then be considered when places at the nursery are allocated and, if your child is admitted, in the arrangements made within the nursery to provide for your child's disability.												
I understand that I should consider informing the school if my child becomes disabled in the future. I understand that the school's ability to make provision for my child's disability will be reduced if I do not inform the school of a disability												
The Authority reserves the right to verify the information given on this form. Any offer of a place will be on the basis that the information supplied is accurate and up to date.												
I understand that I must make a separate application for a school place and that the offer of a place in this nursery does not give priority to an application that I may make for the school												
Signature o	of Parent/C	Carer				Date						

Personal information contained in this form is subject to the Data Protection Act 1998. Data may be exchanged with

other Local Education Authorities where necessary as part of the admissions process.

\*delete as applicable