



NURSERY APPLICATION FORM

Please complete pupil details and return to the school as soon as possible

Surname:		Legal Surname:	
Forename:		Middle name:	
Chosen name:		Gender:	
Date of Birth:		Date of 3rd birthday:	
Home Address:			
Post Code:			
Telephone:			
Parent/Carer(s) full name(s):	Mr/Mrs/Miss/Ms (Delete as appropriate)		
Parent/Carer(s) full name(s):	Mr/Mrs/Miss/Ms (Delete as appropriate)		
Names of any brothers/sisters already at the school:			

Please give details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Place them in the order that you wish for them to be contacted in an emergency.

Priority	Name/Relationship	Home Address / Phone / Mobile	Work Address Phone / Email
1		Tel: Mobile:	Tel: Email:
2		Tel: Mobile:	Tel: Email:

<p>Do you wish your child to have milk? This is FREE for children under the age of five.</p> <p>YES/NO</p>
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More information required overleaf →

Do you wish your child to attend our Reception class when they become of school age? – YES/NO

If you have answered NO, please indicate which school you will be applying to and why:

Name of Medical practice registered with and telephone number:

Please tell us about any Medical Condition(s) including allergies that you think we should know about.

Please complete this section even if you have informed us in the past.

Does the pupil have a disability? – YES/NO

If YES, please indicate the nature of the disability and what special requirements are needed if any.

Does the pupil live with a parent/carer who serves in the British Armed Forces? YES/NO

Previous school attended (if applicable)

Country of Birth:	(as found on Birth Certificate or Passport)		
Nationality:			
Ethnicity :			
First (Main) Language:		Religion:	
Data Protection Act 1998: The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority and with the DCSF.			
Signature:	Date:		

Nursery times are mornings only: 8.55 am – 11.55 am

Please ensure that all sections have been completed and you have signed it.

Please return this form to Ivy Road Primary School as soon as possible.

NURSERY APPLICATION FORM – PART 2

THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS

Is your family in receipt of any of the following?

- **Income Support**
- Income-based **Jobseeker's Allowance (JSA)**
- Income-related **Employment and Support Allowance (ESA)**
- Support under **part 6 of the Immigration and Asylum Act 1999**
- The guaranteed element of **State Pension Credit**
- **Working Tax Credit/Child Tax Credit** with an annual income of no more than £16190
- **Working Tax Credit 4-week run on** (the payment you get when you stop qualifying for Working Tax Credit)
- **Universal Credit** (for the initial roll-out – an income threshold may be included in the future)

Our Nursery could receive additional funding from the Local Authority to improve the provision that disadvantaged three and four year olds receive. By providing the information on this page, you consent to North Tyneside Council checking your eligibility.

We will not use this information for any other purpose or share this information with third parties unless we are legally required to do so.

Child's Name: _____

Parent / Carer Legal Surname (as per Birth Certificate and Benefit Documents)	
Parent / Carer Legal Forenames (as per Birth Certificate and Benefit Documents)	
Date of Birth (Day/Month/Year)	
National Insurance Number or NASS Number	
Signature	

If you are not in receipt of any of the above benefits and this does not apply to your family then please mark as 'NOT APPLICABLE'.

Please return this form to Ivy Road Primary School as soon as possible.