

*For Office Use Only:*

Database updated: ☐

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Distance from school: \_\_\_\_\_



## The Mead Infant and Nursery School Nursery Application Form 2024-2025

Please complete this form in full (in BLOCK CAPITALS) and return it to the school office by 15<sup>th</sup> January 2024. Completing this form does not guarantee a place. Applications received by the closing date will be considered in accordance with the School's Nursery Admission Policy.

### 1. Child's Details

First Name:		Middle Name(s):	
Surname:			
Date of Birth:		<input type="checkbox"/> Male	<input type="checkbox"/> Female (please tick)
Home Address (this must be the address where the child normally lives):			

*We will always seek proof of address when offering a place*

### 2. Parent/Carer Details

Parent/Carer 1 Full Name:	Parent/Carer 2 Full Name:
Salutation (please circle as appropriate): Mr / Mrs / Miss / Ms / Dr / Other	Salutation (please circle as appropriate): Mr / Mrs / Miss / Ms / Dr / Other
Address (if different from child's):	Address (if different from child's):
Daytime Telephone Number:	Daytime Telephone Number:
Mobile Telephone Number:	Mobile Telephone Number:
Email Address:	Email Address:
Relationship to Child:	Relationship to Child:

### 3. Sibling Links – please provide details of all siblings. If any siblings will be attending The Mead or Auriol Junior School in September 2024, please detail below.

Name of Sibling	Sibling's Date of Birth	Attending The Mead or Auriol Junior School in September 2024

#### 4. Preference for Session

Sessions available are as follows (**all sessions are 5 days a week - Monday to Friday, term time only**):

- **Morning** – 9.00am – 12.00noon
- **30 Hours (fully funded)** – 9.00am – 3.00pm
  - These sessions are for families who are eligible for the Government's 30 hours fully funded childcare.
- **30 Hours (15 hours funded/15 hours paid for)** – 9.00am – 3.00pm
  - If you are not eligible for the Government's 30 hours fully funded childcare, we offer the option for you to pay for 15 additional hours each week, on top of your 15 hour funded entitlement.

*Please note that exact Nursery timings may be subject to change – the times detailed above are the current session times.*

Please indicate below your session preference, in priority order.

##### 1<sup>st</sup> Preference (please tick one box only):

- ☐ Morning  
☐ 30 hours (fully funded)  
☐ 30 hours (15 hours funded/15 hours paid for)

##### Reason for preference:

##### 2<sup>nd</sup> Preference (please tick one box only):

- ☐ Morning  
☐ 30 hours (fully funded)  
☐ 30 hours (15 hours funded/15 hours paid for)

##### Reason for preference:

#### 5. Children in Public Care

Is the child in public care of a Local Authority? If yes, please detail which Local Authority.

Yes ☐ No ☐

NOTE: If yes, please also provide a letter from the child's social worker confirming the legal status of the child and the Local Authority with who the child is in care. The letter should also provide the reasons for the preferences for schools.

#### 6. Exceptional Arrangements

Are you applying under the exceptional arrangements category?

Yes ☐ No ☐

NOTE: It is important that details of any exceptional circumstances are attached to this form. If you do not attach full details, we will be unable to consider offering your child a priority placement.

#### 7. Ethnicity, Nationality, Religious Affiliation and Country of Birth

Ethnic origin of family:

Nationality:

Religious Affiliation:

Country of Birth:

## 8. Languages

Main language spoken at home:	
Other languages spoken:	

## 9. Medical

Does your child have any specific medical needs:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide further details:		

## 10. Current Setting

Please provide details below of your child's childcare arrangements (at home/with a relative/childminder/nursery/ playgroup/...).

## 11. Declaration and Parent/Carer Signature

I wish to apply for a nursery place at The Mead Infant and Nursery School. 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 place for my child. I understand that it is my responsibility to provide full information to the nursery and that I will notify them of any changes to the details on this form or accompanying evidence as soon as they occur, including any change of address.			
<b>Signature of Parent/Carer:</b>		<b>Date:</b>	

*Personal Information Policy – We respect your rights and are committed to ensure that we protect your details and the information about your dealings with us. In accordance with the Data Protection Act 2018 and the General Data Protection Regulation (GDPR), we will use your information for the purpose of processing your application for a nursery place. We may share your information (but only the minimum amount of information necessary and only where it is lawful to do so) with Surrey County Council and other agencies (including schools, other councils, central government departments, law enforcement agencies, statutory and judicial bodies, contractors that process data on our behalf and medical advisors). We may also use and disclose information that does not identify individuals for research and strategic development purposes. You can find out more about how we manage your data on our website.*