

Your chance to shine



Hall Green Primary School Nursery Request form

Personal Details

Child's Full Name		Date of Birth	
Male/Female			

Parent/Carer with parental responsibility:		Relationship to child:	
Home Address:			
Postcode:			
Home telephone number:		Mobile:	

If you have arrived in Britain within the last 3 years please state month and year of entry and include a copy of your child's passport and visa.

Month :	Year:
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Is your child in public care (looked after by the Local Authority)?

YES	NO
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Does your child have a brother or sister at this school?

Yes	No
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If so, please give details:

Name:

Date of Birth:

Day	Month	Year

Has your child attended any other Nurseries or child care?

Yes	No
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Name of provider:

Dates:

From:

To

Please indicate whether you would prefer morning(am) or an afternoon (pm) place

am

pm

Does your child have a **Statement** of Special Educational Needs?

Yes

No

Do you consider your child has a disability?

Yes

No

If yes, please state the nature of the disability.

Signature of Parent/Guardian:

Date:

Office use only

Date received:

Checked by:

Proof of ID seen: