

EARLY YEARS APPLICATION FORM: HEATH LANE NURSERY

PLEASE USE BLOCK CAPITALS										
Child deta	ails									
First nam	e:									
Middle na	ime:									
Family name:				1		П				
Date of B	irth:		1		1		Gender:		M/F	•
NHS num	ber:									
Your relationship to the child: (e.g. mother/father/carer/ stepmother/father/ s worker)										
Your child's permanent address (at time of application)										
Address:	Address:									
Special Educational Needs Does your child have a Statement of Special Educational Needs or Educational Health and Care Plan (EHCP)? Yes/No								Vo		
At risk Is your child, or a sibling of your child, subject of an inter-agency child protection plan and has been placed on the Child Protection Register? Please provide evidence with this form. Yes/No										
Children in Public Care Is your child look previously looked after and is now adopted arrangements or special guardianship orderevidence with this form.				ted, or w	ed, or with a child			Yes/No		
Social or medical reasons Do you have a particular medical or social school? Please provide supporting eviden								Yes/No		
If you have a sibling at this school, enter their name and date of birth:										
Early years setting child attends or has attended (if applicable)										
Tick the days you want your child to attend:										
	Mor	nday	Tuesd	ay	Wedne	sday	Thursday	F	riday	Total hours
AM										
PM										
All Day										
If applying	_),			ı		1

If you have any other requirements						
please enter here:						
Please complete the de	tails for both par	ents if living	at the same address:			
	Parent/carer 1 de	tails	Parent/carer 2 details			
Title:						
Forename:						
Surname:						
DOB:						
National Insurance Number:						
National Asylum Support Service (NASS) Number (if applicable):						
Address:						
Email address:						
Telephone numbers						
Daytime:		Mobile:				
L confirm that t	ne details above a	are correct to	the best of my knowledge			
I confirm that the details above are correct to the best of my knowledge. Signature of parent/carer:						
OFFICE HOF CALLY	Date Received:					
OFFICE USE ONLY:	Application No:					

DECLARATION

The information I have given on this form is complete and accurate. I understand that my personal information will be held securely and will be used only for local authority purposes.

I agree to Heath Lane Nursery School using this information to consider my application for a nursery place. I understand that if any part of this completed application form is found false the offer of a place will be withdrawn.

I understand that the completion of an application form does not guarantee a place in the nursery class.

I understand that, if offered a place in the nursery class, I will have to apply separately for a place in reception.

Signature of	f narent/auardian:	 Date:
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Thank you for completing this information. Please return to the school office by 3pm – Friday, 25th March 2022.

Notes to parent

How the information on this form will be used:

By completing this form and signing the declaration you are agreeing for Heath Lane Nursery School, if they are oversubscribed, to check whether your child's details meet the school's published admission rules and if he/she can be offered a nursery place.

Any personal data collected will be treated as confidential under the principles of the Data Protection Act 1998. We will not use the data for any other purpose, nor will we share your data with any third parties other than the Department for Education (for statutory reporting), Hertfordshire County Council departments who may from time to time send you advice, guidance and information relating to changes to early years provision and educational services that are relevant and/or of benefit to your child, and your local children's centre who support the local authority by assisting families to access the services that children are entitled to.

Children who have been adopted from care or are subject to a special guardianship order or a child arrangements order.

Eligibility will be based on your declaration that your child was formally a looked after child and on the evidence of their status e.g. a copy of the relevant order. This form and a copy of the relevant order should be seen by the school and they will confirm with Hertfordshire County Council that they have seen confirmation and enable a place to be offered under this criteria.