

## Application Form

### 1. Child's Information

Full Name:

Date of Birth:

Gender:    Male    Female    Other

Home Address:

Language(s) Spoken at Home:

Ethnicity:

Religion (if any):

### 2. Parent/Guardian Information

#### Primary Contact

Full Name:

Relationship to Child:

Date of Birth:

Phone Number:

Email Address:

Home Address (if different):

National Insurance Number:

**Secondary Contact (Optional)**

Full Name:

Relationship to Child:

Date of Birth:

Phone Number:

Email Address:

National Insurance Number:

**3. Emergency Contacts (Other than Parents)**

**Emergency Contact 1:**

Name:

Relationship to Child:

Phone Number:

**Emergency Contact 2:**

Name:

Relationship to Child:

Phone Number:

**4. Medical Information**

Doctor's Name:

Doctor's Phone Number:

Does your child have any allergies or medical conditions?

If yes, please provide details:

Is your child on any regular medication?

If yes, please specify:

Has your child been immunised against:

Chicken Pox

Diphtheria

Hepatitis A

Hepatitis B

Measles

Meningitis C

Mumps

Pneumonia

Rubella

Polio 2 months

Polio 3 months

Polio 4 months

Scarlet Fever

Tetanus

Whooping Cough

## **5. Additional Needs**

Does your child have any special educational needs or disabilities (SEND)?

If yes, please provide details:

## **6. Preferred Start Date**

## 7. Session Preferences

At St Francis Nursery, we provide two options

### 1. Term-time only places

- 15 hours per week
- Monday to Friday
  - Morning sessions (9:00am – 12:00pm) or
  - Afternoon sessions (2:00pm – 5:00pm)
- These hours can be fully funded for children eligible for government funding

### 2. Full year (51 weeks) places

- Between 20 and 50 hours per week (parents/carers can choose)
- Monday to Friday, 8:00am – 6:00pm
- Children eligible for government funding may access their funded hours at no cost
- Additional hours are optional and charged privately

Please see our [Funding Entitlements and Fee Policy](#) for further details on funding options available.

**Please choose which option you would like by ticking the relevant boxes below:**

#### **Term-time only (Mon-Fri)**

Specify preferred sessions:

Morning sessions: 09:00 – 12:00

Afternoon sessions: 14:00 – 17:00

#### **Full Year (51 weeks), 08:00 – 18:00 – minimum of 2 days**

Specify preferred days:

Mon      Tue      Wed      Thu      Fri

**8. Government funding**

Will you be applying for Government funding?

If yes, do you require support in completing the application?

**9. Any other agencies/professionals involved:**

(please list):

**10. Permissions:**

Please tick to give consent:

Emergency medical treatment

Local outings and trips

Photographs and video for nursery use (and for use on the St Francis website)

Sun cream application

**11. Declaration**

I confirm that the information provided is accurate and complete to the best of my knowledge.

Signature of Parent/Guardian:

Date:

<b>For office use only:</b>	<b>Tick</b>	<b>Signature</b>
Form completed in full		
Birth certificate seen		
Funded place?		

**To save, please 'download with your changes', save the file with your name as the title and email the completed application form to [enquiries@stfrancisnursery.org.uk](mailto:enquiries@stfrancisnursery.org.uk) or send it by post/deliver in person to: 34 Wade's Place, London E14 0DE.**