

Nursery application form

We have more than one intake period for our nurseries so please contact the academy office.

You should not assume that a place has been reserved for your child just because you have provided us with a completed form.

Attending one of our nurseries does not guarantee a place in our schools. You will need to re-apply for Reception places at the appropriate time.



We offer full time and part time places for children aged 3 - 4 years old

The completed form should be returned to the academy office **with documentation to confirm your child's date of birth and address** (see below)

Child's details

First name:		Surname:	
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Sex (please tick):	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of birth:	
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Child's address at the time of this application:

Please note that this must be the address where the child normally lives.

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Postcode:

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If the address where they live is different from the parent / carer address or if parents share custody, please give details of this arrangement below: -

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Two proofs of address must be submitted with this form.

- One of these must be a notification of Child Benefit from HMRC (unless you are subject to immigration control)
- The other should be either a Council tax document, a utility bill, or a mortgage/ rent agreement (less than 3 months old)

1st Parent / Carer details

<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	First Name	Surname
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Relationship to child	Mother <input type="checkbox"/>	Foster carer <input type="checkbox"/>	Other (please specify) <input type="checkbox"/>
	Father <input type="checkbox"/>	Social worker <input type="checkbox"/>	

Contact telephone	Mobile:		Home:	
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E-mail address:	
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2nd Parent / Carer details

<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	First Name	Surname
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Relationship to child	Mother <input type="checkbox"/>	Foster carer <input type="checkbox"/>	Other (please specify) <input type="checkbox"/>
	Father <input type="checkbox"/>	Social worker <input type="checkbox"/>	

Contact telephone	Mobile:		Home:	
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E-mail address:	
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Children with additional needs

	Yes	No
Does your child have an existing Education, Health and Care Plan (EHCP)?	<input type="checkbox"/>	<input type="checkbox"/>
Is an assessment of your child's needs currently in progress?	<input type="checkbox"/>	<input type="checkbox"/>

If you answer 'yes' to any of the above, attach details when returning the form.

	Yes	No
Does your child have any other needs you feel we should know about?	<input type="checkbox"/>	<input type="checkbox"/>

If 'yes', please give details below

Children in care

	Yes	No
Is your child in the public care of the local authority?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered 'yes', please specify: -

Local Authority name			
Social worker name		Telephone:	

Please also provide a letter from the Social Worker confirming the legal status of the child and the local authority the child is in the care of. The letter should also provide the reasons for the preference of school.

Current early years provider / pre-school provision (if applicable)

Playgroup		Nursery	
Hours attended per week:			
Is there any other information you can provide so that we can plan for your child's arrival?			

Siblings

Does your child have a brothers or sisters already attending any other NSCT Academies?

Enfield Heights | Heron Hall | Kingfisher Hall | Woodpecker Hall

If so, please let us know which school, their name, their date of birth and their class / form group

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Declaration and signature of parent / carer

I confirm that I have received and read the admissions criteria for a nursery place in one of our academies and I understand the way in which places will be allocated.

I certify that I am the person with parental responsibility for the child named above and that the information given is true to the best of my knowledge and belief. I understand that false or deliberately misleading information given on this form or in supporting information may render this application invalid. I understand that the academy may check any of the information provided.

Signature

Date

Information supplied will be used for registered purposes and in line with UK GDPR and the Data Protection Act 2018

Provision details

Information about the two types of provision we offer are below.

Please review the options and then indicate your choice(s) in the 'Preferences' section.

You can check your eligibility for free provision at the following web site

www.childcarechoices.gov.uk

Where a child attends consecutive sessions, any gaps between them will include crossover time and children having their packed lunches or snacks **which you will need to provide for them**

Kingfisher Hall Nursery

Session times

Mornings (Mon – Fri)

8.30 am – 11.30 am

Afternoons (Mon – Fri)

12.00 pm – 3.00 pm

All day

8.30 am – 3.00 pm

Weekly sessions

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8.30 am to 11.30 am	8.30 am to 11.30 am	8.30 am to 11.30 am	8.30 am to 11.30 am	8.30 am to 11.30 am
12.00 pm to 3.00 pm	12.00 pm to 3.00 pm	12.00 pm to 3.00 pm	12.00 pm to 3.00 pm	12.00 pm to 3.00 pm

3 – 4 year olds

- 15 hours of free nursery provision is available to everyone.
- This is usually either five morning or five afternoon sessions (i.e. 5 x 3 hours)
- 30 hours of free nursery provision is available to those who are eligible
- This is usually five mornings and five afternoon sessions (i.e. 10 x 3 hours)
- For those not eligible for 30 hours, extra sessions can be purchased

If you wish to purchase additional sessions or discuss provision better suited to your needs, please contact the academy office for the prices and to discuss availability.

☎ 020 8344 9890 | kingfisher@northstartrust.org.uk

Preferences

Please tick the appropriate boxes

Kingfisher Hall Nursery

3 - 4 year olds

<input type="checkbox"/>	I am entitled to 15 hours and I prefer five morning sessions
<input type="checkbox"/>	I am entitled to 15 hours and I prefer five afternoon sessions
<input type="checkbox"/>	I am entitled to 15 hours. I have ticked my preference above but I wish to discuss alternative arrangements* or purchase additional sessions
<input type="checkbox"/>	I am eligible for 30 hours nursery provision and wish to take five full days

*Should we have the space and the resources to facilitate, flexible hours / days are also available through direct arrangement and agreement with the school

End of form

OFFICE USE ONLY

Proof of address <input type="checkbox"/>	Proof of date of birth <input type="checkbox"/>	Date received
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CLA <input type="checkbox"/>	Staff <input type="checkbox"/>	Sibling <input type="checkbox"/>	Distance
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Signature	Date
(Head teacher or their representative)	