**EARLY YEARS APPLICATION FORM: ST THOMAS OF CANTERBURY SCHOOL**

**Nursery Admissions – SEPTEMBER 2025**

|  |
| --- |
| **PLEASE USE BLOCK CAPITALS** |
| **Child Details** |
| **First name:** |  |
| **Middle name:** |  |
| **Family name:** |  |
| **Date of Birth:** | / / | **Gender:** | M/F |
| **NHS number:** | \_ \_ \_ /\_ \_ \_ /\_ \_ \_ \_ |
| **Your relationship to the child:** (e.g. mother/father/carer/stepmother/father/social worker) |  |
| **Your child’s permanent address (at time of application)** |
| **Address:**  |  |
|  |
|  |
| **Special Educational Needs** *Does your child have an Educational Health and Care Plan?* | **Yes/No** |
| **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 looked after, or was previously looked after and is now adopted, or under a special guardianship order?* | **Yes/No** |
| **Social or medical reasons** *Do you have a particular medical or social need to be taken into consideration with your choice of school? (Please provide supporting evidence with this form)* | **Yes/No** |
| **Does your child have a sibling already in this school? Please enter their details:**  |
|  |
| **Early years setting child attends or has attended (if applicable)** |  |
|  |
| **PLEASE LIST YOUR CHOICE OF SETTING IN ORDER OF PREFERENCE (optional)** |
| **1** |  |
| **2** |  |
| **3** |  |
|  |  |
| **Tick the days you want your child to attend:**  |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** |  |  |  |  |  |
| **PM** |  |  |  |  |  |
| **All day** |  |  |  |  |  |
| **If applying for 30 hours free childcare, please provide your HMRC code here if known\*:**  |  |

***St Thomas of Canterbury offers 15 hours free Nursery provision every morning (Monday to Friday). If you are interested in a further 15 hours childcare (30 hours in total) can you please indicate which afternoons you wish your child to attend. If you are not eligible for 30 hour provision, you have the option of paying £6.00 per hour per afternoon).***

|  |  |
| --- | --- |
| **If you have any other requirements, please enter here:**  |  |
| **Please complete the details for both parents**  |
|  | **Parent/carer 1** | **Parent/carer 2** |
| **Title:** |  |  |
| **Forename:** |  |  |
| **Surname:** |  |  |
| **D.O.B.** |  |  |
| **National Insurance Number** |  |  |
| **National Asylum Support Service Number (if applicable):** |  |  |
| **Address:**  |  |  |
|  |  |
|  |  |
| **Email address:** |  |  |
| **Telephone numbers** |
| **Daytime:** |  |  |
| **Mobile:**  |  |  |
| **I confirm that the details above are correct to the best of my knowledge.** |
| **Signature of parent/carer:** |  |
| **Please return this form to the school you are making your application to.** |
| **Office use only:**  | **Date****Received:**  |  |
| **Distance:** |  |

**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 the above named 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 the 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 my preferred choice of school is oversubscribed, the setting’s published admission rules will be used to establish if the child can be offered a place.
* I understand that if offered a place in the nursery class, I will have to apply separately for a place in reception.

**Signature of parent/guardian:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notes to parents**

**How the information on this form will be used:**

* Please also complete the Supplementary Information Form available via the school website.
* By completing this form and signing the declaration you are agreeing for St Thomas of Canterbury, 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 in Early Years provision and education 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.

|  |
| --- |
| **THIS FORM MUST BE RECEIVED, TOGETHER WITH THE SUPPLEMENTARY INFORMATION FORM AND ANY OTHER ACCOMPANYING RELEVANT DOCUMENTATION BY THE FIRST CHOICE SCHOOL BY 13th December 2024** |