



**FAIRLANDS PRIMARY SCHOOL**  
**NURSERY APPLICATION FORM 2020/21**

PLEASE USE BLOCK CAPITALS		
<b>Child's details:</b>		
<b>First Name</b>		
<b>Middle Name</b>		
<b>Family Name</b>		
<b>Date of Birth</b>	/ /	<b>Male / Female</b>
<b>NHS Number</b>		
<b>Child's permanent address at time of application</b>		
<b>Address</b>		
<b>Special Educational Needs? (EHCP plan of Statement of Educational needs)</b>	YES / NO	
<b>Children in Public Care</b>	YES / NO	
<b>Social/Medical Need</b>	YES / NO	
<b>Name of sibling, if any, at Fairlands Primary School</b>		
<b>Early Years setting your child currently attends (if any)</b>		
PLEASE TICK EITHER BOX A (15 HOURS APPLICATION) <u>OR</u> BOX B (30 HOURS APPLICATION)		
<input type="checkbox"/> <b><u>BOX A</u> – 15 HOURS ONLY</b>		
Children allocated 15 hours will be expected to attend <b>either 5 mornings (8.30 -11.30) OR 5 afternoons (12.30-3.30)</b>		
<b>We cannot guarantee you a morning or afternoon session</b> , however, if due to working, childcare or diagnosed medical reasons it is <i>essential</i> for your child to attend a particular session, please submit a detailed request in writing with this application form.		

**BOX B – 30 HOURS ONLY**

HMRC CODE: .....

Children allocated **30** hours will attend **8.30 – 3.30 term time only**.The school only offers **30 x 30 hour places**.

**IF ELIGIBLE, AN HMRC CODE MUST BE PROVIDED BEFORE WE CAN CONFIRM YOUR 30 HOUR PLACE.** Pupils **cannot** be admitted for 30 hours childcare without this code as proof of eligibility and until the code has been verified by the school. If you do not provide an HMRC code, or are not eligible, but still require a 30 hour place, you agree to pay an hourly charge (cost to be confirmed nearer the start date), which will be payable two weeks in advance.

If not allocated a 30 hour place, will you accept a 15 hour place: YES / NO

**We cannot guarantee you a morning or afternoon session**, however, if due to working, childcare or diagnosed medical reasons it is *essential* for your child to attend a particular session, please submit a detailed request in writing with this application form.

If entitled to 30 hours, but wish to split the provision with another setting or childminder, please add details of the other provider below:

Provider:

Contact Number:

**PLEASE COMPLETE DETAILS OF ALL ADULTS WHO HAVE  
PARENTAL RESPONSIBILITY FOR YOUR CHILD**

	Parent/Carer details 1	Parent/Carer details 2
<b>Title</b>		
<b>Forename</b>		
<b>Surname</b>		
<b>DOB</b>		
<b>Relationship to child</b>		
<b>NI Number</b>		
<b>Address</b>		
<b>Email address (print clearly)</b>		
<b>Contact Numbers</b>	Home:  Mobile:  Work:	

## 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 Fairlands Primary 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 to be 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.

If applying for a 30 hour session, I agree to provide the HMRC code. If I do not provide an HMCR code, but still wish for my child to attend for 30 hours, I agree to pay an hourly charge (cost to be confirmed nearer the start date), which will be payable two weeks in advance.

<b>Signature of parent/carer</b>	Date ...../ ...../.....
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**PLEASE RETURN THE COMPLETED APPLICATION FORM TO:**

**BY HAND OR POST:**           **Fairlands Primary School  
Pound Avenue  
Stevenage  
Herts  
SG1 3JA**

**BY EMAIL:**                   **signed and scanned copy to:**  
[nurseryadmissions@fairlands.herts.sch.uk](mailto:nurseryadmissions@fairlands.herts.sch.uk)

**Applications are considered on a 'first come, first served' basis**

<b>For office use only</b>	Date application received .....
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