

Roper Street Eltham London SE9 1TR T 020 8850 1528 E sao1@elthamce.greenwich.sch.uk www.elthamcoeschool.co.uk

NURSERY ADMISSION FORM

PLEASE NOTE: Those parents wishing to apply for a nursery place under the faith criteria should also complete a Supplementary Information Form and return it to the school together with this application form.

NAME OF CHILD:				
DATE OF BIRTH:				
GENDER: MALE	FEMALE			
NAME OF PARENT(S)/CARER((S):			
ADDRESS:				
POSTCODE:				
HOME TEL NO:	MOBILE:			
EMAIL:				
IS THIS CHILD IN THE CARE OF A LOCAL AUTHORITY OR ACCOMMODATED BY A LOCAL AUTHORITY (i.e. a "looked after child")? YES NO				



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DOES YOUR CHILD HAVE A SPECIAL MEDICAL AND/OR SOCIAL NEED(S)? YES NO					
If 'Yes', please give details					
Please indicate the sessions yo offering sessional places and fu				l be	
All children (3 years plus) are ei week (3 hours per session x 5 s		•	cation Grant for 1	5 hours per	
Re our Full time places: there is lunch provision, this will be £13					
Some parents might be eligible to claim for a 30 hours per week place, more details available at www.childcarechoices.gov.uk/ . There is an additional cost to parents to cover the lunchtime provision - £37.50 per week payable monthly, in advance.					
I confirm that I wish my child to sessions (please indicate your o					
Please tick all that apply:					
am sessions only pm sess	ions only	Full time place	e: 5 days per week		
Signed			Parent / Carer		
Date					
Please note:					
A PLACE IN THE NURSERY CLASS DOES NOT GUARANTEE A PLACE IN THE RECEPTION CLASS.					
ALL PARENTS MUST FOLLOW THE PRIMARY ADMISSION PROCEDURES FOR ADMISSION TO OUR RECEPTION CLASS.					
OFFICE USE ONLY					
Date Application received					
SIF received?	YES/	NO			
Intake			/		