

# St Vincent's Catholic Primary School



*To love, serve and learn as Jesus shows us*

## Nursery Admission Form – Confidential

Child's first name(s):		
Child's surname:		
Child's surname on birth certificate if different from above :		
Child's date of birth:		Gender:
Home Address: (including post code):		
Parent / Guardian name(s):		
Parent / Guardian Email:		
Contact number:		
Is the child in or formally in the care of the Local Authority?	Yes / No If yes, which local authority:	
Does your child have any Special Education Needs, Disabilities or Medical Needs? If yes, please provide details:		

Is your child a baptised Catholic?	Yes / No
If yes, please state parish of baptism and date:	
In which parish do you now live? (See Note 1)	
If your child is not a baptised Catholic, please state to which denomination or faith, if any, your child belongs (see Note 2)	

### Notes

#### 1. Evidence of Baptism (Catholic)

If you are applying for a Catholic primary school and your child was baptised in the parish served by the school then the parish baptismal records will be checked by the school to confirm baptism. If your child was baptised in another parish a baptismal certificate or the completion of the statement below will normally be required to confirm your child is a baptised Catholic.

#### 2. Evidence of Faith Group membership

- a. If you are applying for a Catholic school and want to be considered under the relevant criterion as an other than Catholic Christian please state your Christian denomination. Proof of Baptism in the form of a Baptismal Certificate or confirmation

in writing by completing the statement below to show that your child is a member of a faith community by an appropriate Minister of Religion is required.

- b. If you belong to a faith other than the Christian faith, please state to which faith you belong. An appropriate faith leader would need to confirm in writing by completing the statement below that your child is a member of their faith group.

Minister of Religion/Faith Leader Minister/Leader

(Print name):

Address:

Position held:

Signed and dated:

I am eligible for:

15 Hours Nursery provision for 3 and 4 year olds

30 Hours Nursery Provision for 3 and 4 year old

Please provide the following information – by providing this information you are giving consent to check eligibility:

National Insurance Number:

Funding eligibility code:

Session preference:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Lunchtime					
Afternoon					

### **Parent Declaration and Signature**

I confirm that the information given on this form is accurate and subject to verification.

I understand that there is no guarantee that a nursery place will be available and that it may not be possible to allocate the preferred session time.

Signature (Parent/Carer):

Date:

Relationship to child:

Contact Telephone Number:

Email address: