 **BISHOP BRONESCOMBE C of E SCHOOL**

Head Teacher: Mrs Debbie Carmichael NPQSL

Boscoppa Road

ST AUSTELL

Cornwall, PL25 3DT

Tel: 01726 64322

Email: <bishopbronescombe.secretary@celticcross.education>

Website: [www.bishopbronescombe.co.uk](http://www.bishopbronescombe.co.uk)

NURSERY APPLICATION FORM

(Please note: This application form does not constitute an offer of admission)

CONFIDENTIALITY: The information given below will be maintained on the school’s data base to which no unauthorised person shall have access and will be subject to strict control under the Data Protection Act.

**Section A – Basic Pupil Details**

Legal Forename Preferred Forename

Legal Surname Preferred Surname

Middle Name(s) Date of Birth

Previous Surname

Age at admission Gender Male/Female

Child of Service Personnel (Parent serving in Royal Navy, Army or RAF) Yes / No

Brothers/Sisters (including half/step brothers and sisters)

*Please list in age order any siblings who are currently at this school.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname | Forenames | Gender | Date of  Birth | Same address |
|  |  | Female/Male | / / | ✓ / 🗶 |
|  |  | Female/Male | / / | ✓ / 🗶 |
|  |  | Female/Male | / / | ✓ / 🗶 |
|  |  | Female/Male | / / | ✓ / 🗶 |

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**Section B –Pupil Address**

House number/name Street

Town/City Postcode

Tel Home/Mobile

**Section D – Medical Information**

🞏 Emergency Medical Consent - *this confirms your agreement for the school to initiate medical appropriate treatment in the event of a medical emergency.*

Medical Practice

Practice Address

Telephone

Doctor’s Name

Medical Conditions/Information – Please include details of any allergies/medical conditions e.g. asthma and medications

regularly taken. (If you require more space please give full details on a separate sheet).

**If none, please state ‘NONE’**

**Section C – Pupil Ethnic/Cultural Information**

*The school is required by law to provide the information you give to the DfE.*

*The school will not use this information for any other purposes.*

**Ethnicity (**Data source: Parent 🞏 Pupil 🞏 Other 🞏)

🞏 White – Cornish 🞏 Other White British 🞏 White – Irish

🞏 Gypsy/Roma 🞏 Traveller of Irish heritage 🞏 Any other White background

🞏 Indian 🞏 Pakistani 🞏 Bangladeshi

🞏 Any other Asian Background 🞏 White and Black Caribbean

🞏 White and Asian 🞏 White and Black African 🞏 Any other Mixed background

🞏 Black Caribbean 🞏 Black African 🞏 Any other Black background

🞏 Chinese 🞏 Any other Ethnic Group 🞏 Refused

🞏 Information not yet obtained

**First Language** 🞏 ENGLISH 🞏 OTHER (please specify)

**Religion**

🞏 Anglican 🞏 Buddhist 🞏 Christian 🞏 Hindu 🞏 Jewish

🞏 Methodist 🞏 Muslim 🞏 No Religion 🞏 Other Religion 🞏 Roman Catholic

🞏 Sikh

**Section E – Family/Home**

**Contact 1**

Title Forename Surname

House Number/Name Street

Town/City Postcode

🞏 Parental Responsibility 🞏 Court Order

Relationship: 🞏 Mother 🞏 Father 🞏 Step Parent 🞏 Foster Parent

🞏 Grandparent 🞏 Other Relative 🞏 Neighbour 🞏 Guardian

🞏 Social Worker

Telephone Home Work

Mobile Email

**Contact 2**

Title Forename Surname

House Number/Name Street

Town/City Postcode

🞏 Parental Responsibility 🞏 Court Order

Relationship: 🞏 Mother 🞏 Father 🞏 Step Parent 🞏 Foster Parent

🞏 Grandparent 🞏 Other Relative 🞏 Neighbour 🞏 Guardian

🞏 Social Worker

Telephone Home Work

Mobile Email

**Contact 3**

Title Forename Surname

House Number/Name Street

Town/City Postcode

🞏 Parental Responsibility 🞏 Court Order

Relationship: 🞏 Mother 🞏 Father 🞏 Step Parent 🞏 Foster Parent

🞏 Grandparent 🞏 Other Relative 🞏 Neighbour 🞏 Guardian

🞏 Social Worker

Telephone Home Work

Mobile Other

**Section F – Consent to collect from School**

Please list the names of adults allowed to collect your child from school and provide a password

Password

**Section G – Nursery History**

Previous Nursery Name

Previous Nursery Address / Tel No.

**Section H – Pupil Premium**

Has either of the applicant’s parents been in a Service Profession in the last four years? Y / N

Is the applicant currently in Care, or ever been in Care (this includes adopted from Care)? Y / N

Has the applicant been eligible for Free School Meals within the last 6 years? Y / N

If you have answered Yes, please give full details below. You will also need to provide us with documentary evidence. Please attach a copy or bring in an original document for us to copy.

🞏 Documentation included

**Section I**

I confirm that the above information is true and accurate. I undertake to inform the school if any of the above details change. I understand that this form does not constitute an offer admission by the school.

Signed Date

|  |
| --- |
| **Section J – Consent**  *In order to comply with the Data Protection Act 1998, the School needs your consent before taking photographs or making video recordings of your child for purposes which are not part of its core activities.*  *You Have the option to indicate whether or not you consent to your child’s images being taken and used for different purposes.* ***You can withdraw your consent at any time by writing to the school.***  *Please give your consent by putting your initials next to each statement*  *Please initial here*  I give my consent to images and video recordings of my child being taken and used for official  School purposes of promoting or publicising the school (e.g. the School Facebook and  Instagram page, the School newsletter, the School’s brochure and other promotional material).  I give my consent to images of my child being used on the school website and I understand  That these images will be available on the World Wide Web.  I give my consent that the School can take photographs and make video recordings of my  child for the School’s own records, archives and future interest (e.g. photographs of sports  team).  I give my consent that my child can appear in video recordings or in collections of photographs  stored on CD roms which the School may make of School events and which it may sell to  parents of children at the school to raise funds for the benefit of the School.  I give my consent to my child being included in any images taken by other parents or carers  who wish to photograph or record school events in which their children are participating  I give my consent for the press to take and use images of my child.  The School may give the press the first name/first and surname (*delete as appropriate)* of my  child for publishing with the child’s photograph in a newspaper or for captioning on television. |
| I give consent for my child to be taken out of school in the local area on walks for local  studies.  I give consent for my child to undertake local journeys out of school by coach/mini bus. |
| I confirm that the above is true and accurate. I undertake to inform the school if any of the above consents change.  Signed Date |

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D.O.B\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please highlight the sessions you would like your child to attend each week.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
| Morning Session  (3hr)  8.45 – 11.45 | Morning Session  (3hr)  8.45 – 11.45 | Morning Session  (3hr)  8.45 – 11.45 | Morning Session  (3hr)  8.45 – 11.45 | Morning Session  (3hr)  8.45 – 11.45 |
| Lunch Session  (0.5 hr)  11.45 – 12.15 | Lunch Session  (0.5 hr)  11.45 – 12.15 | Lunch Session  (0.5 hr)  11.45 – 12.15 | Lunch Session  (0.5 hr)  11.45 – 12.15 | Lunch Session  (0.5 hr)  11.45 – 12.15 |
| Afternoon Session  (3 hr)  12.15 – 3.15 | Afternoon Session  (3 hr)  12.15 – 3.15 | Afternoon Session  (3 hr)  12.15 – 3.15 | Afternoon Session  (3 hr)  12.15 – 3.15 | Afternoon Session  (3 hr)  12.15 – 3.15 |

I would like my child to start in the term of their third birthday and I will pay for sessions Yes / No

(Morning and afternoon sessions = £13.50 per session. Lunch sessions £2.50 per session – all sessions are payable in advance)

I will wait until my child is funded Yes / No

|  |  |
| --- | --- |
| If your child attends another Nursery/Early Years setting please give details below | |
| Name of Nursery/Early Years setting | Number of hours at this Nursery/Setting |

Signature of Parent/Carer Name in capitals

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
| Date: | / / |

**We are offering after school wraparound provision for nursery children. Please contact the school office for booking information. Charges are as follows: -**

Afterschool – 3.15pm – 4.30pm - £5.00 (including snack)

Afterschool – 3.15pm – 6.00pm - £8.00 (including snack)

**2 year old health check information**

Has your child’s health 2 year check been completed? Y / N Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Were any concerns raised during this 2 year check? Y / N

If yes, please give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Has your child received a nursery/pre-school 2 year progress check Y / N Date: \_\_\_\_\_\_\_\_\_\_

Were any concerns raised during this 2 year check? Y / N

If yes, please give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Pupil Premium**

Has either of the applicant’s parents been in a Service Profession in the last four years?

Y / N

Is the applicant currently in Care, or even been in Care (this includes adopted from Care)?

Y / N