2022/ 2023 APPLICATION FOR 2 YEAR OLD ENTRY AT CHIPSTEAD VALLEY PRIMARY SCHOOL NURSERY

(For parents / carers whose child will become 2 years old between 1st September 2021 and 31st August 2022)

Child and parent/carer details

Child's		Child's	Child's first			
surname:		name:				
Date of birth:			Male /	female		
Main lan	guage(s	s) spoken at h	ome:			
Name of person with parental				:		
Surname:			First na	a		
Mr		Mrs	Miss		Ms	
Mr		Mrs	Miss		Ms	
Home ad	ldress o	f child and pa	rent/carer:			
Postcode:						
Home telephone:						
Mobile telephone:						
Work telephone:						
e-mail address:						
Date mo	ved to t	his address:				
Are you on the electoral roll			Yes / No			
at the above address:						
_		ending any ot e.g. childmind		Yes / N	lo	
If Yes ple	ase giv	e details:				
How did you hear about us?						

1. Looked after children/children in public care

Is the child named in section 1 in public care or looked after? (i.e. in the care of a local authority, resident with a foster carer or in a children's home / adopted subject to a residence order or special guardianship order, immediately following having been looked after). If your child meets the criteria to be classified as a looked after child or a child in public care, you must enclose either a letter from the relevant authority confirming the legal status of the child, a copy of the care order, or a copy of the special guardianship order. Please note that children adopted from overseas are not classified as children in public care.

No	Plea	ase proceed to question 3			
Yes	Plea	se provide th	vide the details below		
Name	e of assigned	d Social Work	er:		
Conta	act number:				
Local	Authority w	vith whom th	e child is in care:		
Date of which the child took u			p residence at		
If you			_	Chipstead Valley Primary School at the same time as	
Siblin	ng's full nam	e:			
Date of birth:					
Boy /	Boy / girl:				
Curre	Current Registration group:				
If ther	e are any sp ry particular	ecial reasons ly desirable, _l		child's admission to Chipstead Valley Primary School n below. You should include any medical, social or	
I atta	nch a letter o	of support fro	m the person name	Please attach separate sheets if necessary	
	cation:				
Name	e:			Tel:	

Professional Status:

Address:

4. Children of members of staff

Children of members of staff will have priority in the oversubscription criteria if the staff member has been employed at the school for two or more years at the time at which the application for admission to the school is made, and/or if the member of staff is recruited to fill a vacant post for which there is a demonstrable skill shortage.

5. Distance

Children living closest to the school as measured in a straight line from the child's main address to the school gate will receive higher priority.

		Please ✓
1	I am likely to qualify for free 15 hours, 2-year old entitlement and would like to take up this option in the mornings (NB: Eligibility criteria applies – check www.gov.uk for entitlement to free childcare for 2 year olds)	
2	I am likely to qualify for free 15 hours 2-year old entitlement and would like to take up this option in the afternoons (NB: Eligibility criteria applies – check www.gov.uk for entitlement to free childcare for 2 year olds)	
3	I would like to take up the option of a paid 2-year old morning OR afternoon place (please state AM or PM)	
5	I would like to take up the option of a paid 2-year old place for mornings AND afternoons (all day)	
(NB:	Comments relevant to your application morning sessions are extremely popular, in the event that we are oversubscribed for morning sessions, ld accept afternoon places if available)	please state if you

7. Declaration

I confirm the information supplied is correct:

Full name of parent/carer (please print):	
Signature:	
Relationship to child:	
Date:	