

# Bedwell Primary School



Headteacher : Mrs J E Moore, B.Ed

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## Nursery Application Form - September 2018

Please complete in BLOCK CAPITALS

Child's Details	
First name:	
Surname:	
Legal surname:	
Gender	Male / Female
Date of Birth:	
NHS Number:	_ _ _ / _ _ _ / _ _ _ _
Your child's permanent address (at time of application): ..... ..... ..... Postcode: .....	
<b><u>Special Educational Needs</u></b> Does your child have a Statement of Special Educational Needs or an Educational Health & Care Plan? YES / NO (If yes, please enclose evidence)	
<b><u>At Risk:</u></b> Is your child or a sibling of your child subject of an inter-agency Child Protection Plan and been placed on the Child Protection Register? YES / NO (If yes, please enclose evidence)	
<b><u>Children in Public Care:</u></b> Is your child looked after or was previously looked after? YES / NO	
<b><u>Social or Medical Reasons:</u></b> Does your child or family have a particular medical or social need to attend this school? YES / NO (If yes, please enclose evidence)	

## Child's Details (continued)

### Siblings

If your child has siblings at our school, please enter their names here:

.....

.....

### Pre-School

Name and address of Early Years setting your child has attended (if applicable):

.....

.....

.....

## Parental Details

	1st Parent / Carer Details	2nd Parent / Carer Details
<b>Title:</b>		
<b>Forename:</b>		
<b>Surname:</b>		
<b>Legal Surname:</b>		
<b>Relationship to child:</b>		
<b>National Insurance Number:</b>	_ _ / _ _ / _ _ / _ _ / _	_ _ / _ _ / _ _ / _ _ / _
<b>National Asylum Support Service Number (if applicable)</b>		
<b>Address:</b>	<p>.....</p> <p>.....</p> <p>.....</p> <p>Postcode: .....</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>Postcode: .....</p>
<b>Email Address:</b>		
<b>Daytime Telephone:</b>		
<b>Mobile Number:</b>		

## Supporting Information

Additional information to support your application (if applicable)

## Declaration

I confirm that:

- The details on this form are correct to the best of my knowledge:
- I understand that my personal information will be held securely and will only be used for local authority purposes
- I understand that if any of this completed application is found to be false, the offer of a place will be withdrawn
- I understand that the completion of an application does not guarantee a place in Bedwell School's Nursery

Signature of Parent / Carer: .....

Name of Parent / Carer (please print): .....

## OFFICE USE ONLY:

Date received:

Distance:

Evidence received:

**Application Deadline : Friday 16th March 2018**