Application for Admission to Seabridge Primary Nursery

Before completing this form, you should read the Nursery Admission Arrangements provided on our website at www.seabridgeprimary.org.uk Please complete and email your application form to **office@seabridge.set.org**

1. NURSERY INTAKE- children can start our Nursery the term after they turn three years old (depending on availability/space). Please insert the date below you wish your child to start at Seabridge Primary Nursery.

2. CHILD'S DETAILS

Child's Legal Surname: Date of Birth:

Child's Legal First Name: Male: ☐ Female: ☐

Full Postal Address: (including postcode)

NB: it is your responsibility to advise us immediately if these details change.

3. NURSERY PLACE YOU ARE APPLYING FOR AS IN ACCORDANCE WITH THE ADMISSION CRITERIA (Please select as applicable):

a) The term after my child becomes 3 years of age Yes ☐

b) I have enclosed a copy of my child's birth Certificate Yes ☐

4. FURTHER INFORMATION ABOUT YOUR CHILD

Is your child a twin of triplet, etc. (one of a multiple birth)? Yes ☐ No ☐

If yes, please provide the names of related applications:

Is this child in the care of a local authority? (Please select each box as appropriate) Yes ☐ No ☐

Has the child previously been in the care of a local authority but has since been adopted or become subject to a residence order or special guardianship order since being in public care Yes ☐ No ☐

If 'Yes' to either of the above, please provide Social Worker and Local Authority contact details in the box below:

Does this child have an Education, Health and Care Plan (EHCP) Yes ☐ No ☐

NAME OF ELDER BROTHER OR SISTER IF CURRENTLY AT SEABRIDGE PRIMARY

Name of elder brother or sister **Date of Birth**

5. DETAILS OF PERSON COMPLETING THIS FORM

Surname:		Please indicate title Mr / Mrs / Miss / Ms
First Name:		
Relationship to Child:		
Contact Number:		
Email Address:		

6. ADDITIONAL NOTES TO SUPPORT YOUR APPLICATION

If applicable, please attach any additional information to support your application if it is relevant to the admissions criteria.

Print Name……Signature……Date……..