St Aidan's RC Primary School

Moorhouse Lane, Ashington, Northumberland, NE63 9LR
Tel: 01670 813308
Email: Admin@st-aidans.northumberland.sch.uk
Web address: www.st-aidans.northumberland.sch.uk

Nursery Admission Form

Head Teacher: Mrs Samantha Leslie

Please help us by filling in the details below and returning this form to us as soon as possible.

Child's details:

Last Name _____ Date of Birth: _____

Forename: _____ Boy or Girl: _____

Preferred forename : _____ Child's Religion: _____

Please attach a **COPY** of your child's baptismal certificate when you return this form.

Address at which the child is normally resident

Parent / Carer's name : Mr/Mrs/Ms/Miss_____
(a parent is any person who has parental responsibility for or is the legal guardian of the child)

Address: _____

Postcode: _____ Home Tel: _____

Mobile: _____ Work: _____

Email Address: _____

Details of any other person residing at the above address

Name: _____

Home: _____ Mobile : _____ Work: _____

Relationship to Child _____

Does your child have an Education Health Care Plan or is he/she currently being assessed? ☐ Yes ☐ No

Looked After Children

A "looked after child" is a child who is in the care of a local authority or provided with accommodation by that local authority. Is your child in public care?

If Yes - which Local Authority? _____

Name of Social Worker _____

Tel No: _____

CONTACTS

1. Mr / Mrs / Miss / Ms Forename _____ Surname: _____

Address: _____

_____ Post code: _____

Relationship to the child: _____

Contact telephone Number

Home: _____ Mobile : _____ Work: _____

Email address: _____

Please give one other contact who we may call in the event of an emergency

2. Mr / Mrs / Miss / Ms Forename _____Surname: _____

Contact telephone Number

Home: _____ Mobile : _____ Work: _____

Relationship to the child _____

Details of siblings attending school at the time of admission:

For the purpose of admissions siblings are deemed to be brothers and sisters, step brothers and sisters, adopted brothers and sisters and other children who reside permanently in the household and be treated as siblings.

Name of Sibling (1): _____ Male ☐ Female ☐

Date of Birth _____

Name of Sibling (2): _____ Male ☐ Female ☐

Date of Birth _____

Are there any social or medical reasons for your preferences?

_____

_____

Other Relevant Information

Who looks after your child all day at the moment? _____

Who will usually collect your child each day from nursery?

Name: _____

Relationship to child _____

Has your child attended on of these?

Playgroup: _____ Toddler Group: _____

Nursery Unit:

_____

Why would you like a place at our Nursery? _____

_____

_____

Special Information

Is there any special information about your child you would like us to have? This might include hearing problems, difficulties with speech or vision as well as other medical problems?

_____

_____

Name and address of Doctor, Health visitor, social worker or other helper:

_____

_____

15 hour Flexible entitlement for 3/4 year olds

OPTION	
1.	Morning Only - Mon, Tues, Weds, Thurs, Fri 8.30a.m.—11.30a.m.
2.	Afternoons Only - Mon, Tues, Weds, Thurs, Fri 12.30p.m. - 3.30p.m.

My first choice for my child is Option * _____

My second choice is Option * _____

The choice of option needs to be for the entire academic school year and due to place availability cannot be changed after a few weeks.
Please do all you can by supporting your child to be ready for the Nursery experience. Encourage them to be independent, by being able to dress, use the toilet and wash hands by themselves etc. Soothers will have a negative impact on your child's language development so it is advisable to limit their usage and support your child not to become dependent upon them.
Lots of excellent advice, support and guidance in helping your child are readily available from your Health Visitor and Ashington Surestart.
St Aidan's is currently not able to offer the full entitlement of 30 hours but you are able to take up the remaining 15 hours in an alternative provision.

Please note carefully

1. Please let us know if you change your address after completing the form. This will avoid us writing to your old address with the offer of a place.

2. Please remember we cannot guarantee a place, or specific option, to everyone who would like one. In the event of over subscription our Admissions Policy criteria will apply. Please refer to:

http://www.st-aidans.northumberland.sch.uk/website/admissions/98780

3. If you would like an acknowledgement of the receipt of your application form please include a stamped addressed envelope.

4. We aim to make our Nursery offers for each term no later than 31st October, 28th February and 31st May each year. Please contact us If you have not heard from us by the relevant date.

5. A place at St Aidan's Nursery does not guarantee a Reception place for your child. Applications must be made the year prior to entry, please refer to our Admissions Policy.

Signed _____ Date _____