



APPLICATION FOR NURSERY PLACE

First Name of Child: _____ Surname of Child _____

Gender: Male Female Date of Birth: _____

Mother's Name: _____ Father's Name: _____

Mother's NI Number _____ Father's NI Number: _____

Mother's date of birth _____ Father's date of birth: _____

Mother's Telephone _____ Father's Telephone: _____

Address: _____

Email address: _____

Did/does your child have a Brother or Sister at the nursery? Yes No

If yes, what is their name, class and Keyworker

Language spoken at home: _____

Nursery applicants: If we are able to offer your child a place, please tick which session you would prefer:

Morning (9.00 – 12.00) Afternoon (12.30 – 3.30) Full time (8am – 6pm)

Does your child have a statement of special educational need? Yes No

Declaration: I confirm that the information provided on this form is correct to the best of my knowledge. I understand that if false information is provided on this form, it may result in an offer of a place being withdrawn.

Parent/Carer

Signature: _____ Date: _____

Please post your completed application form to:
Kay Rowe Nursery School - Nursery Applications
Osborne Road, Forest Gate, London, E7 0PH

OFFICE ONLY: *Child is due to start: September 20.....*

Date put on system: _____ *By:* _____

Proof of address *Proof of date of birth*

Place offered: _____ *Place not offered:* _____