



This form is to be used by parents to request a place Cygnets Nursery. Only children who will be starting school in a Reception class in the following September will be granted a place. This form should not be used for any other purpose. Admission to Cygnets occurs once a year in September.

Name of School **CYGNETS NURSERY, LAKEVIEW SCHOOL**

Child's surname First Name

Child's home Address

Post code Telephone number

Email Address

Child's Date of Birth Male/Female

Does your child have any additional needs, either physical or educational that the school needs to be aware of **YES / NO**

If **YES**, please complete over page

Does your child speak another language at home other than English **YES/NO**

If **YES**, please indicate which other language your child speaks

Is your child a **"looked after"** child (*). **YES / NO**

If **YES** please indicate with which Authority and enclose supporting evidence.

() The Children Act 1989 defines a "looked after" child as a child or young person who is accommodated by the local authority (Section 20) or a child or young person who is the subject of a full Care Order (Section 38) or an interim Care Order (Section 31)*

Please give details of any other of your children who currently attend this school.

Child's Name: Date of Birth:

Please indicate when you would wish your child to start in Cygnets nursery. If you are unsure about the earliest date that your child would be able to start, staff at the school. Please note that as our nursery is non-statutory, attendance at Nursery is no guarantee of a place in Reception – places need to be applied for, through the local authority.

I would like my child to start in Cygnets Nursery in:-

| |
|--|
| September 2022 (Reception starter 2023) |
| September 2023 (Reception starter 2024) |
| September 2024 (Reception starter 2025) |

Please indicate by ticking whether you would prefer a place for 30 hours (6 hours per day Monday – Friday) or 15 hours (3 hours per day Monday – Friday) and whether your preference is for a morning or afternoon session. We will take into account your preference when offering the place however this **cannot be guaranteed**.

Preference: Please tick

30 hours

15 hours

AM

PM

To confirm: Address (please supply one of the following)

- a copy of a recent utility bill e.g. gas, electricity, water or Council Tax
- a copy of your Solicitors letter confirming exchange of contracts together with completion date or a copy of your tenancy agreement
- Statutory Declaration – this is a legal document and you may be asked to provide this if you are unable to provide either of the above

To confirm: Parental Responsibility (please supply)

- a copy of your child’s birth certificate

To confirm: Right of Abode (please supply)

- if moving from abroad please supply a copy of the relevant pages of the child’s passport or other documentary evidence

Please set out below any additional information that may be relevant to your admission request.

I understand that this application will be considered in accordance with the admissions policy for nursery children and that my request can only be granted if a place is available and I have correctly completed the application form.

I confirm that my child will be dry and out of nappies prior to starting Cygnets Nursery, unless there is delayed personal development.

Failure to complete the form correctly may result in your admission being declined.

Name of Parent/Carer

Signature of Parent/Carer Date

Please complete and return this form to Lakeview School.

Please note that admission into Cygnets Nursery does not guarantee a place in the reception year. You must re-apply for a place at the school in accordance with the co-ordinated admissions arrangements.

January 2022