

## Application for Admission to Burhill Nursery School in 2018/19

#### **Burhill Primary School and Nursery**

**New Berry Lane** 

Hersham

Surrey

**KT12 4HQ** 

01932 225 836

### office@burhill.surrey.sch.uk

In order to be considered in the initial allocation of Nursery places this form should be returned to school by  $4^{th}$  March 2019

- Please note that completing this form does not guarantee a place
- Governors will consider applications received by the deadline date in accordance with the Nursery Admissions Policy
- Please read the Nursery Admissions policy before completing this form
- If you believe you meet the criteria for 30 hours free entitlement for 3-4 year old children, you must obtain an 11-digit eligibility code from HMRC We need this code before we can offer a 30 hour place in the nursery. Please fill in the form in block capitals and sign it
- Please return to the school by the closing date of 4<sup>th</sup> March 2019
- You will be notified by the school if your child has been allocated a place after the closing date
- Please contact the school if you have any queries concerning completion of this form.
- N.B.- if parents are unable to get a code before the deadline for applications, due to your child's birth date, please go ahead and apply anyway, making a note on the application form that you will provide us with a code as soon as you are able.
- WE MUST SEE THE FOLLOWING ORIGINAL DOCUMENTATION AT THE SCHOOL OFFICE BEFORE AN APPLICATION CAN BE PROCESSED:
  - .Your child's birth certificate
  - .Your most recent council tax bill
  - .Recent utility bill, not more than three months old (e.g. gas/water/electricity NOT a mobile phone bill)





# This nursery application round is open to children who will turn 4 years old between 1st September 2019 and 31st August 2020

| 1. Child's Details  |                 |                     |  |  |  |
|---|-----------------|---------------------|--|--|--|
| Child's Last Name:  |                 | T                   |  |  |  |
| Child's First and Middle  |                 |                     |  |  |  |
| Names:  |                 | 0 1 14 1 /5         |  |  |  |
| Child's Date of Birth:  | //              | Gender: Male/Female |  |  |  |
| How old will your child be in   | Vacra           | 1 a m tha           |  |  |  |
| September 2019?   | Yearsl          | WOTHIS              |  |  |  |
|   |                 |                     |  |  |  |
| Child's Home address:   |                 |                     |  |  |  |
| (this must be the child's normal  |                 |                     |  |  |  |
| place of residence and not a  |                 |                     |  |  |  |
| relative or carer's address)  | Postcode        |                     |  |  |  |
| Special Dietary Requirements:   |                 |                     |  |  |  |
| Special Dietary Requirements.   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
| Medical Conditions/allergies:   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
| Doctor's Surgery:   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
| Child's Ethnicity:  |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
| Home Language:  | First Language: |                     |  |  |  |
| N. C. III. C.   |                 |                     |  |  |  |
| National Identity: (e.g. British/English/Welsh/Scottish/Other)                      |                 |                     |  |  |  |
| (e.g. Dittisti/ Erigiisti/ Weisti/ Ocottisti/                                       | outer)          |                     |  |  |  |
| Additional language spoken:   |                 |                     |  |  |  |
| Country of Birth:   |                 |                     |  |  |  |
| Policion:   |                 |                     |  |  |  |
| Religion: (e.g. Church of England/Roman Catholic/Christan/Hindu/Muslim/No religion) |                 |                     |  |  |  |
| (o.g. Sharon of England/Normal Satisfies of Install/Fillings/Washin/No Foligion)    |                 |                     |  |  |  |
| Previous Nursery/Playgroup:   |                 |                     |  |  |  |
|   |                 |                     |  |  |  |
| Mode of transport to school:  |                 |                     |  |  |  |
|   |                 |                     |  |  |  |





| 2. Preference Details  |                |
|--|----------------|
| Please tick under which criterion you are applying for a nursery place   | Please tick    |
|  | in this column |
|  |                |
| Looked after and previously looked after children  |                |
| ( if the child is already in public care of a local authority or has previously been in care,  |                |
| please state which Local Authority and provide evidence with your form):   |                |
|  |                |
| Where there is a social or medical need for a place at the nursery   |                |
| school   |                |
| (E.g. does your child have any special education needs, special social needs or a  |                |
| disability?  |                |
| Are they supported by Social Services, a Speech Therapist, Educational Psychologist, Portage or Child and Family Guidance? An application will not be considered under |                |
| this criterion unless independent evidence is provided. As such, please provide further  |                |
| details together with any relevant documentation):   |                |
|  |                |
|  |                |
|  |                |
|  |                |
|  |                |
|  |                |
| Where a child has a sibling attending the main school at the time  |                |
| of admission or is expected to have a sibling attending the main   |                |
| school.  |                |
| Please provide name(s) and date(s) of birth of siblings and year group(s)  |                |
| expected to be in at September 2019.   |                |
| 1 Name   |                |
| 1. NameYear  |                |
| Group  |                |
| 2. NameYear  |                |
| Group  |                |
| •  |                |
| 3. NameYear  |                |
| Group  |                |
|  |                |
| Children of staff who are employed at the school and who meet  |                |
| one of the following conditions;   |                |
| a) employed for two or more years at the time at which the application for admission to the school/nursery is made, and or   |                |
| b) the member of staff is recruited to fill a vacant post for which there is a   |                |
| demonstrable skill shortage.   |                |
| Č  |                |
| This does not extend to members of the Governing Body. If applying under   |                |
| this criterion you will need to submit the additional SIF form available on the  |                |
| school website www.burhill.surrey.sch.uk   |                |
| Children living in the vicinity of Burhill Primary School, ranked in   |                |
| order of distance from school.   |                |
|  |                |





| 3.Parents/ Guardians/Carer's Details   |   |   |
|--|---|---|
| Title:   | Mr/Mrs/Miss/Ms/   | Mr/Mrs/Miss/Ms/   |
| Last Name:   |   |   |
| First Name:  |   |   |
| Relationship to<br>Child:  | Mother / Father / Step Parent / Foster Parent / Social Worker / Other family member / Other Contact*/ Other Relative* *Please provide details | Mother / Father / Step Parent / Foster Parent / Social Worker / Other family member / Other Contact*/Other Relative*  *Please provide details |
|  | Parent Occupation:  | Parent Occupation:  |
| Address: ( if different from that of the child given overleaf)   |   |   |
|  | Postcode  | Postcode  |
| Daytime telephone number:  |   |   |
| Mobile telephone number:   |   |   |
| Email address:   |   |   |
| Name and ages of all brothers and sisters (if any), including step brothers and sisters living in the same family unit | Sibling Name:  1  | Sibling DOB:  |
| 15 there arry additions  | ai illioittiation you would like to silale:   |   |
|  |   |   |





### Additional information needed for children claiming 30 hours free childcare

The Government has currently indicated eligible families are those where both parents are working, or the sole parent is working in a lone parent family, and each is earning on average a weekly minimum wage equivalent to 16 hours at National Minimum or Living wage, (i.e. equating to about £5,500 per annum) and less than £100,000 per year. Additional information can be found on the Surrey County Council website. https://www.surreycc.gov.uk/people-and-community/family-information-service/choosing-childcare-for-children-and-young-people/paying-for-childcare/30-hours-free-childcare-for-working-parents.

All children who receive the extended free entitlement provision at Burhill Nursery for 30 hours per week are allocated a core offer of 15 hours which will be reverted to in the event of a child's eligibility for this entitlement ending. At this point in time parents will either have the option to directly fund the additional 15 hours per week themselves (refer to the Terms and Conditions document) or reduce their child's nursery provision to the core offer of 15 hours. **Note**: Core offer session days will be discussed and agreed at the time any change needs to be made.

| Parent/carer National insurance number   | 30 hours eligibility code (11 digits)  |
|--|--|
| PLEASE EXPRESS YOUR PREFERENCE FROM THE FOLLOWING OPTIONS:   | Please choose your preference by stating 1st, 2nd,3rd, 4 <sup>th</sup> , 5 <sup>th</sup> and 6th |
| 1. Monday and Tuesday for 6 hours (9am – 3pm) and Wednesday morning for 3 hours (9am – 12pm) Totalling 15 hours per week.  |  |
| 2. Wednesday afternoons for 3 hours (12pm – 3pm) and Thursday and Friday for 6 hours (9am – 3pm) Totalling 15 hours per week.  |  |
| 3. Five days (Monday-Friday 9am – 3pm), all 30 hours free due to eligibility for 30 hours free entitlement, (subject to availability) Eligibility confirmation code shown above)   |  |
| 4. Five days (Monday to Friday 9am – 3pm) but not eligible for 30 hours, so 15 hours funded and 15 hours fee paying at market rates (market rate TBC – rate set by Surrey County Council)  |  |
| All places will be allocated in accordance with Nursery Admissions policy.  Note: Preferences cannot be guaranteed as sessions are allocated subject to availability which may result in your child being offered a place at either one of the session options outlined. |  |





### Early Years Pupil Premium (EYPP) Registration Form

The Early Years Pupil Premium is an additional sum of money paid to childcare providers for children of families in receipt of certain benefits (please see <u>link here</u> for details). This funding will be used to enhance the quality of their early years' experience by improving the teaching and learning and facilities and resources, with the aim of impacting positively on your child's progress and development.

For more information please speak to your childcare provider.

If you believe your child may qualify for this EYPP please provide the following information **for the main benefit holder** to enable us to confirm eligibility

| the main benefit holder  | to enable us to c  | Oriniti engionity   | '  |  |  |  |
|--|--|---|--|--|--|--|
| Parent/carer first name:   |  |   |  |  |  |  |
| Parent / carer last name   | :  |   |  |  |  |  |
| Parent / carer date of bi  | rth:   |   |  |  |  |  |
| Parent/ carer National Insurance number/NASS number:   |  |   |  |  |  |  |
| I wish the school to claim EYPP : Signature:   |  |   |  |  |  |  |
| Parent/Carer Declaration and signature of Parent/Carer:  |  |   |  |  |  |  |
| which I am applying for the I certify that I am the person the information given is the I understand that if I give supporting documents, or | at place. on with parental ue to the best of any false or delib withhold any rel place for my chilo rsery and is subje | responsibility formy knowledge a perately mislead evant information. I understand t | ding information on this form and/or on, this may lead to the withdrawal of an that the school reserves the right to |  |  |  |
| Date:  |  |   |  |  |  |  |
| Definitions:  Extended Entitlement /30 15 hours per week (in add 15 hours per week) for eli  | dition to the unive  | ersal offer of  |  |  |  |  |
| L<br>Birth Certificate:  | Council Tax:   | Utility Bill:   | Nursery Year:  |  |  |  |
| Sibling:   | Nearest School:  | Distance:   | Checked by:  |  |  |  |
|  |  |   | I  |  |  |  |

