

# Form SA13

Applying for a nursery place – September 2017, January 2018 or April 2018



Please see [www.cumbria.gov.uk/schooladmissions](http://www.cumbria.gov.uk/schooladmissions) detailed information about applying for a nursery place, including when children become eligible for free part time nursery education, closing dates for applications and how places at nurseries are allocated.

## Personal information – child's details

Child's first name	_____									
Child's surname	_____									
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Gender (male/female)	_____	
Home address	_____							Postcode	_____	
Current/Previous Nursery/playgroup	_____									

## Parent/carer details

Full name of parent/carer	_____	Title (Mr/Mrs/Ms/Miss etc)	_____
Relationship to child	_____		
Contact tel number	_____		
Contact email address	_____		
I give consent for all correspondence to be sent to this email address	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<i>If you are caring for someone else's child for more than 28 days and you are not an immediate relative you may be Private Fostering and it is a legal requirement that you inform the Local Authority. If you think you may be Private Fostering, please tick this box <input type="checkbox"/> Further information is available by contacting 0333 240 1727 or on Cumbria County Council's website at <a href="http://www.cumbria.gov.uk/childrenservices/childrenandfamilies/privatefostering/whatisfostering.asp">http://www.cumbria.gov.uk/childrenservices/childrenandfamilies/privatefostering/whatisfostering.asp</a></i>			

## Your preferred nursery

Name of nursery	_____				
If your application is successful, which sessions would you prefer (please tick one box)					
5 mornings	<input type="checkbox"/>	5 afternoons	<input type="checkbox"/>	No preference	<input type="checkbox"/>
Reasons for choice of sessions:	_____				
Other than the above (please give details):	_____				

## Additional Information

Does the child have any brothers or sisters (including step or foster siblings) who live at the same address and attend a school or nursery?		
Name	Date of birth	School/nursery
_____	_____	_____
_____	_____	_____
_____	_____	_____

1 Is the child, or was the child previously, in the care of a local authority?    **Yes**                       **No**

If yes, which Local  
Authority? \_\_\_\_\_

2 Are you applying for a nursery on the basis of faith?                                              **Yes**                       **No**

For further information about 1 & 2 above, and for information about what evidence you may need to provide if you have answered 'yes' to 1 or 2, please see the website.

Please note that if you do not provide evidence, it may affect your chances of being offered a place.

If you want to provide any additional information, please use this space:

**Parental declaration**

I confirm that I have parental responsibility for this child and the information given is correct. I understand that if I have given false information, any place offered may be withdrawn. I also agree to whatever checks may be carried out to verify accuracy. I understand that I need to notify the nursery of any change in my circumstances which occur after I have completed this form (including change of address)

Full name of parent/carer signing the form  
(please print)

Signed

Date

Correspondence address if different from  
child's address

*Please note – this address will not be  
used in the allocation process*

**Please take this form to the nursery to which you are applying, by the relevant closing date, along with proof of your child's date of birth (ie birth certificate/passport) and your home address**

**For nursery use only**  
Date received (please verify with stamp)

Date of birth verified

Address Verified