



# Application for admission to a Nursery Class in September 2022

**For children born between 1 September 2018 and 31 August 2019**

Please read our '**Starting in a Hounslow School Nursery**' brochure before completing this form. Completed forms should be returned to your preferred schools by **6 May 2022**. You will need a separate form for each school.

## 1. Child's details

Child's forename	Child's surname
Child's date of birth (confirmation will be required)	Boy <input type="checkbox"/> Girl <input type="checkbox"/> (please tick)
Child's home address (This must be the address where the child normally lives. If this address is different from the parent/carer address, please give reasons for this. If parents share custody, this must be stated and both addresses shown).	
	Postcode
Does your child have a Statement of Special Educational Needs or Education, Health and Care Plan (EHCP)	Yes <input type="checkbox"/> No <input type="checkbox"/> (please tick)
Does your child have a disability or special needs which may require special attention	Yes <input type="checkbox"/> No <input type="checkbox"/> (please tick)
Details	

## 2. School Preference – Hounslow Schools Only

Please read the '**Starting in a Hounslow School Nursery**' brochure carefully before completing this form.

- Write the name of the school you wish to apply for in the box below. You will also be required to submit a supplementary information form (SIF) to any Faith School or Academy, by the closing date.
- Please give the name and date of birth of any older sibling\* who will still be attending the preferred school in September 2022.
- Please use the column on the right only if you wish to give reasons for your school preference. This might include consideration under the staff criteria. If there are exceptional medical or social reasons why your child should attend this particular school, you must provide professionally supported evidence from a hospital consultant or social worker with this application form. It is very important that you check the admission criteria of the school for which you are applying, to see if priority for admission can be given on this basis.

1. Name of School	2. First name, surname and date of birth of any sibling* already attending the school	3. Reasons for Preferences (see note above). Priority under exceptional medical or social grounds will only be considered if supporting documents from a consultant, social worker, or other appropriate professional are attached to your form.

All primary schools offer 15 hours of early education. If you are a working family you may be able to get an additional 15 hours (30 hours in total) To check eligibility and see the schools that offer 30 hours, please visit [www.hounslow.gov.uk/30hours](http://www.hounslow.gov.uk/30hours)

Are you applying for 15 hours?	Yes <input type="checkbox"/> No <input type="checkbox"/> (please tick)
Are you applying for 30 hours? (Please check you are eligible before selecting)	Yes <input type="checkbox"/> No <input type="checkbox"/> (please tick)
If 30 hours cannot be offered to you, do you still wish to be considered for a 15 hour place?	Yes <input type="checkbox"/> No <input type="checkbox"/> (please tick)

### 3. Parent's / carer's details

#### Parent/carer 1

Title (please tick)	Mr	Mrs	Miss	Ms	Other (please state)
Forename					Surname
Relationship to child					
Address (if different from child's address given overleaf) with reasons					
					Postcode
Daytime telephone			Evening telephone		
Mobile			Email		

#### Parent/carer 2

Title (please tick)	Mr	Mrs	Miss	Ms	Other (please state)
Forename					Surname
Relationship to child					
Address (if different from child's address given overleaf) with reasons					
					Postcode
Daytime telephone			Evening telephone		
Mobile			Email		

### 4. Looked after children and Previously Looked After children

Is your child in the care of a Local Authority? Yes  No  (please tick)

Was your child looked after, but ceased to be so because they were adopted (or became subject to a child arrangement order or special guardianship order). Yes  No  (please tick)

If yes, please state which Local Authority and Social worker's name \_\_\_\_\_

If yes, please provide a letter from the social worker confirming the legal status of the child and the local authority with whom the child is/was in care, or a copy of child arrangement or special guardianship order (if applicable).

### Declaration and signature of parent / carer

- I wish to apply for a place at the school named in Section 2.
- I certify that I am the person with parental responsibility for the child named on page 1 and that the information given is true to the best of my knowledge and belief.
- I understand that any false or deliberately misleading information given on this form and/or supporting information may render this application invalid, or lead to the offer of a place being withdrawn.

Parent's/carer's signature	Date
Print name	Relationship to child

In accordance with the Data Protection Act 2018, the London Borough of Hounslow (the Council) will use your information for the purpose of processing your application for a nursery class place, to (a) deal with your requests and administer its departmental functions; (b) meet its statutory obligations; and (c) prevent and detect fraud. The Council may share your information (but only the minimum of information necessary to do the above and only where it is lawful to do so) with other departments within the Council (including the elected members), central government departments, law enforcement agencies, statutory and judicial bodies, community service providers and contractors that process data on its behalf. The Council may also use and disclose information that does not identify individuals, for research and strategic development purposes.

**PLEASE ATTACH A COPY OF YOUR COUNCIL TAX BILL FOR THE CURRENT YEAR AS PROOF OF YOUR ADDRESS AND A COPY OF YOUR CHILD'S SHORT BIRTH CERTIFICATE.**