

Application for admission to a Nursery Class in September 2024

For children born between 1 September 2020 and 31 August 2021

Please read our 'Starting in a Hounslow School Nursery' brochure before completing this form. Completed forms should be returned to your preferred schools by **8 March 2024**. You will need a separate form for each school.

returned to your preferred schools	by 8 March 2024. You will no	ed a separate form for each s	chool.		
1. Child's details					
Child's forename		Child's surname			
Child's date of birth (confirmation v	vill be required)	Boy 🗖 Girl 🗖	(please tick)		
Child's home address (This must be parent/carer address, please give					hown).
			Postcod	e	
Does your child have a Statement Health and Care Plan (EHCP)	Education,	Yes 🗖	No 🗖	(please tick)	
Does your child have a disability of	r special needs which may requir	e special attention	Yes \square	No 🗖	(please tick)
Details					
2. School Preference	 Hounslow Schools O 	nly			
Please read the 'Starting in a He	ounslow School Nursery' broo	hure carefully before complet	ing this for	m.	
1. Write the name of the school y information form (SIF) to any F	you wish to apply for in the box b aith School or Academy, by the c		ed to submi	t a suppl	ementary
2. Please give the name and date	e of birth of any older sibling* wh	o will still be attending the pr	eferred sch	ool in Se	ptember 2024
must provide professionally su	right only if you wish to give reas e are exceptional medical or socia pported evidence from a hospital admission criteria of the school fo	l reasons why your child shou consultant or social worker w	ıld attend th vith this app	nis partic olication	ular school, yo form. It is very
1. Name of School	2. First name, surname and date of birth of any sibling* already attending the school	3. Reasons for Preferences (see exceptional medical or socia supporting documents from appropriate professional are	al grounds w a consultan	ill only be t, social w	considered if vorker, or other
All Hounslow infant and primary seducation. If you are a working fasee the schools that offer 30 hour	mily you may be able to get an ac	dditional 15 hours (30 hours in			
Are you applying for 15 hours?			Yes 🗖	No 🗖	(please tick)
Are you applying for 30 hours? (F	Yes 🗖	No 🗖	(please tick)		
If 20 hours cannot be afford to v	ou do you still wish to be seesid	ared for a 1E hour place?	Voc \square	Мо П	(places tick)

3. Parent's / c	arer's	details						
Parent/carer 1								
Title (please tick)	Mr	Mrs	Miss	Ms	Other (please state)			
Forename					Surname			
Relationship to child								
Address (if different fr	om child	's address	given over	rleaf) with r	easons			
					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 fr	om child	's address	given over	rleaf) with r	easons			
					Postcode			
Daytime telephone					Evening telephone			
Mobile					Email			
4. Looked aft	ter chi	ldren a	nd Pre	viously I	Looked After children			
Is your child in the car	e of a Lo	cal Autho	rity?			Yes 🗖	No 🗖	(please tick)
Was your child looked	-				•	Vac 🎞	No 🗖	(nlaga + i als)
(or became subject to If yes, please state wh		J			•	Yes 🗖	NO L	(please tick)
,		,			g the legal status of the child and	the local au	 uthority w	vith whom the
child is/was in care, or	а сору (of child arı	angement	or special o	guardianship order (if applicable).			
Declaration a	nd sig	nature	of pare	ent / car	er			
I wish to apply fo								
 I certify that I am the best of my kn 				ponsibility f	or the child named on page 1 and	that the inf	formatior	n given is true to
•	any false	e or delibe	rately misl		rmation given on this form and/or ng withdrawn.	supporting	informati	ion may render
Parent's/carer's signat	ure				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.