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**Waiting list Application Form**

**Name of Nursery, child care place required for:-……………………………………**

**Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_\_**

**Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male / Female**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Any known disability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Health Centre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Carer’s Name: 1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_ Home Language: \_\_\_\_\_\_\_\_\_\_\_**

Nursery Place Required (please circle)

|  |  |  |
| --- | --- | --- |
| Fee Paying Provision | 2 Year Old EEE Funding | 3 & 4 Year Old EEE Funding |
| M T W T F  AM PM Full Day | AM PM | AM PM  30 Hours |
| Do you have any concerns around your child’s development? Is there any special educational needs / requirements? |  | |
| Are there any professionals currently involved with your child? |  | |
| Has your child been on a Child protection, Child in Need, or My Family Plan (CAF)? |  | |

Office Use

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date received |  | Start date |  | Settling date |  |
| Details of contact to parent | | | | | |
| **Date** |  | | | | |
| **Date** |  | | | | |
| **Date** |  | | | | |
| **Date** |  | | | | |
| **Date** |  | | | | |
| Additional information |  | | | | |

All information remains confidential – exceptions will be made in line with our safeguarding procedure if we believe a child could be at risk. Any information shared with other professionals is treated in a sensitive manner.

|  |  |
| --- | --- |
| Details of signposting | |
| **Date** |  |
| **Date** |  |
| **Date** |  |
| **Date** |  |

Upon induction full information will be provided to parents / carers about the nursery and Birmingham City Council policies and procedures. Prior to settling you will need to provide your child’s birth certificate and red book. Failure to provide accurate information may result in funding being withdrawn and your child’s nursery place being withdrawn. Additional charges will include late fees and payments for snack and dinners where applicable. In line with GDPR your personal information will be stored securely and upon admission, full information on how we use your information will be provided.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Professional’s Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Full Name (Print)