

LITTLE HOUGHTON CE PRIMARY SCHOOL APPLICATION FOR NURSERY ADMISSION

NAME OF CHILD					
DATE OF BIRTH					
DETAILS					
PARENTS/CARERS	Pare	ent/Carer 1:		Parent/Car	er 2:
NAME(S) OF PARENTS/CARERS					
ADDRESS:					
TELEPHONE NUMBERS					
НОМЕ					
MOBILE					
EMAIL					
DATE OF APPLICATION					
DATE TO START NURSERY					
SESSIONS REQUIRED (afternoon only sessions are not available)	MONDAY	TUESDAY	WEDNESDA	Y THURSDAY	FRIDAY
Morning session 8.50 – 11.50					
Morning and lunch Session 8.50 – 13.00					
Morning, lunch and afternoon session 8.50 – 14.50					
If you want to extend the afternoon session to finish at 3.15 please indicate for each day required					

FUNDING ENTITLEMENT	I am entitled to (please delete as appropriate):
	15 hours funded
	30 hours funded
ADDITIONAL SETTING	If your child will be attending another setting in addition to Little Houghton CE Primary School please state the name of the setting:
	Please detail how the funded hours will be split across the settings:
NON FUNDED HOURS	Any hours booked in addition to funded hours will be charged at £5 per hour.
This application is made by:	
Name:	
Signature:	
Date:	