



# St Giles' and St George's C of E Academy

## Application for Admission to Nursery

Before completing this form you should read the Nursery Admissions Policy and Guidance provided on our website at: [www.stgilestgeorgesacademy.co.uk](http://www.stgilestgeorgesacademy.co.uk). Please complete your application electronically\* and email to: [bursar@stgg.org.uk](mailto:bursar@stgg.org.uk). Alternatively, you can submit your completed handwritten form to the academy office.

### NURSERY INTAKE YOU ARE APPLYING FOR:

January       April       September

### CHILD'S DETAILS

Child's Legal Surname:  Date of Birth:

Child's Legal First Name:  Male  Female

Full Postal Address:   
 Postcode:

**NB: it is your responsibility to advise us immediately if these details change.**

Present/Previous Nursery Provider (if applicable):

Is your child one of multiple birth e.g. twin, triplet? Yes  No

If yes please provide the names of related applications:

Is this child in the current care of local authority? Yes  No

Has the child previously been in the care of a local authority but has since been adopted (or become subject to a residence order or special guardianship order since being in public care?) Yes  No

**If 'Yes' to either of the above, please provide Social Worker and Local Authority contact details:**

From a returning Service/Crown Servant family? Yes  No

Does this child have a statutory statement of educational need or Education, Health and Care Plan (EHCP)? Yes  No

**DETAILS OF OLDER SIBLING ATTENDING ST GILES' AND ST GEORGE'S ACADEMY**

Name of Sibling:  Date of Birth:   
School attending:  Current Year Group:

**DETAILS OF PERSON COMPLETING THIS FORM**

Title:   
Surname:   
First Name:   
Relationship to Child:   
Contact Number:   
Email Address:

**ADDITIONAL INFORMATION TO SUPPORT YOUR APPLICATION**

**DECLARATION AND SIGNATURE OF APPLICANT**

I certify that the information I have provided is true to the best of my knowledge, and understand that any false or deliberately misleading information provided on this form and/or supporting papers may render this application invalid and could lead to the withdrawal of an offer of a school place for my child.

Name:  Signature:   
Date:

\*To complete the application electronically please click the 'Fill & Sign' tab located at the top right hand corner. Next click the 'Add Text' button and move the cursor to the boxes on the form, once the cursor is over the box right click and type in the information required. Once the form is complete save and email to: [bursar@st-giles-st-georges.staffs.sch.uk](mailto:bursar@st-giles-st-georges.staffs.sch.uk)