CAPTAIN COOK PRIMARY SCHOOL



Stokesley Road, Marton in Cleveland, Middlesbrough TS7 8DU

NURSERY APPLICATION FORM										
Child's Details										
Surname:			Forename:							
Middle na	me:	Chosen Name:								
Date of Birth:			e: Female:							
Address:										
Post Code:										
Home Telephone No: E-mail Address:										
Please indicate whether you would like your child to attend a morning or afternoon nursery session. AM / PM										
Please inform school of any changes of address, contact numbers or if you wish to withdraw your application.										
Parent(s)/Guardians(s) who share responsibility for the child										
Mother's full name:			Father's full name:							
Telephone Number:		•••	Telephone Number:							
Email Address:			Email Address:							
Brother(s)/Sister(s) currently at Captain Cook Primary School:										
Name: Year/Class:										
Name:			Year/Class:							
The following documents must be seen and photocopied by the office on application: • Your child's Birth Certificate (original) • Proof of address (child benefit letter / household bill / council tax, gas etc) Admissions to nursery classes, giving priority in accordance with the following guidelines:- • Children aged 4+ who live in the admission zone for the school • Children aged 4+ who live outside the admission zone but who have a brother or sister attending the school at the time the nursery child will be admitted. • Children aged 3+ who live within the admission zone for the school. • Children aged 3+ who live outside the admission zone but who have an elder brother or sister attending the school at the time the nursery child is to be admitted. • Other children aged 4+ • Other children aged 3+ (Priority will go to the oldest children within each of the above categories)										
PLEASE NOTE A PLACE IN NURSERY DOES NOT GUARANTEE A PLACE IN SCHOOL										
Children start full-time school in the school year in which they turn five; the first year of school is called Reception. Applications for Reception places are made between November and January in the school year the child turns four. If you would like your child to attend a school nursery you must consider the fact that your child may NOT be offered a place in school. (if you have older children already attending the school.) Details on how to apply for school places can be found on Middlesbrough Councils website. http://www.middlesbrough.gov.uk or contact School Admissions 01642 201890.										
Signed: Date: Date:										
		For so	chool use only							
	Birth Certificate seen Proof of address seen		IN zone list OUT of zone list Date received							

Custody and Court Orders	C	4:									
The school needs to know of any Court Orders affecting your child. Please indicate whether any order is in force for your child. YES/NO											
If so, please specify, (e.g. residence	ce, contact/access,	prohibited steps,	specific	issues):							
Please indicate which Court made the Order and the date:											
Family Doctor Doctor's Name:Practice Name:											
Address:											
Child's Health Does your child have any medical conditions?											
Is he/she regularly taking any medications prescribed by your doctor? YES/NO											
Are there any points relating to your child's health which would be helpful for the school to know?											
Other Services Please indicate any other services that have been recently involved with your child. (e.g. Social Services, Education Psychologist, Speech Therapist, etc.)											
I acknowledge that in order to promote safety and protection of children, and to comply with DfE guidance, the school has a duty to refer any serious concerns about the well-being of its pupils to Social Services Department.											
How will your child generally trav	vel to school?	Cycle		Car		Walks					
(Please tick one box only)		Public Bus		School Bus		Taxi					
Please indicate whether or not your child has a parent who is serving in a regular HM Forces military unit. YES/NO											
•	•	-	_		-						
Other information Is there any other information you feel we should be aware of? (e.g. family circumstances, religious considerations, special diet)											
Religion:	eligion:										
Ethnic Origin: Please tick one	box only to indica	te the ethnic bacl	ground	of your child.							
White:		Mixed	1.	-							
British				k Caribbean							
Irish		White	& Black	k African							
Traveller of Irish Heritage			& Asiar								
Gypsy/Roma		Any o	Any other mixed background								
Any other white background											
Asian or Asian British		Black or Black British Caribbean									
Indian				African							
Pakistani		Any o	ther Bla	ck background							
Bangladeshi Any other Asian background		Chine	ng A								
Ally office Asian background	Ь		Any other Ethnic background								
I do not wish an ethnic background category to be recorded											
Religion: Home Language:											
Nationality:		Country o	f Birth: .								