For Office Use Only:						
Database updated:	Arbor updated:	Distance from school:				

## The Mead Infant and Nursery School Nursery Application Form 2024-2025 (Late)



Please complete this form in full (in BLOCK CA	APITALS) and r		issions@mead.surrey.sch.uk or to the		
Completing this form does not guarantee a pla application will be considered in accordance was available o	ace. The appl vith the School	ication deadline	ission Policy for any remaining places		
1. Child's Details					
First Name:	M	iddle Name(s)	:		
Surname:					
Date of Birth:		] Male	Female (please tick)		
Home Address (this must be the address where the child normally lives):	We will alwavs	s seek proof of ag	ldress when offering a place		
'					
2. Parent/Carer Details					
Parent/Carer 1 Full Name:		Parent/Carer 2 Full Name:			
Salutation (please circle as appropriate):		Salutation (please circle as appropriate):			
Mr / Mrs / Miss / Ms / Dr / Other		Mr / Mrs / Miss / Ms / Dr / Other			
Address (if different from child's):		Address (if dif	ferent from child's):		
Daytime Telephone Number:		Daytime Telephone Number:			
Mobile Telephone Number:		Mobile Telephone Number:			
Email Address:		Email Address:			
Relationship to Child:		Relationship to Child:			
3. Sibling Links – please provide detai Mead or Auriol Junior School in Sep					
		ite of Birth	Attending The Mead or Auriol Junior School in September 2024		

4. Preference for Session Sessions available are as follows (all session	ıs are 5 day	s a week - Monday to Friday, term time only):					
Sessions available are as follows (all session	is are 5 day	a week Monday to Friday, term time only).					
• <b>Morning</b> – 8.50.00am – 12.00noon							
<ul> <li>30 Hours (fully funded) – 8.50am – 3.00pm</li> <li>These sessions are for families who are eligible for the Government's 30 hours fully funded childcare.</li> </ul>							
, -	Governme	for) - 8.50am - 3.00pm nt's 30 hours fully funded childcare, we offer the ours each week, on top of your 15 hour funded					
Please note that exact Nursery timings may session times.	be subject	to change – the times detailed above are the current					
Please indicate below your session preference	ce, in priori	ity order.					
1st Preference (please tick one box onl	y):	Reason for preference:					
<ul><li>☐ Morning</li><li>☐ 30 hours (fully funded)</li><li>☐ 30 hours (15 hours funded/15 hours paid</li></ul>	l for)						
2 <sup>nd</sup> Preference (please tick one box onl	y):	Reason for preference:					
<ul><li>☐ Morning</li><li>☐ 30 hours (fully funded)</li><li>☐ 30 hours (15 hours funded/15 hours paid</li></ul>	l for)						
<b>5. Children in Public Care</b> Is the child in public care of a Local Authorit	y? If						
yes, please detail which Local Authority.	Y	′es □ No □					
		d's social worker confirming the legal status of the are. The letter should also provide the reasons for the					
<b>6. Exceptional Arrangements</b> Are you applying under the exceptional							
arrangements category?	Y	′es □ No □					
NOTE: It is important that details of any excattach full details, we will be unable to cons	•	rcumstances are attached to this form. If you do not g your child a priority placement.					
·							
7. Ethnicity, Nationality, Religious Affil	iation and	I Country of Birth					
Ethnic origin of family:							
Nationality:							
Religious Affiliation:							
Country of Birth:							

8. Languages							
Main language spoken at home:							
Other languages spoken:							
9. Medical	Ī						
Does your child have any specific medical needs:	Yes 🗆	No 🗆					
If yes, please provide further details:							
40.0							
Please provide details below of your child's childcare arrangements (at home/with a relative/childminder/nursery/playgroup/).							
I wish to apply for a nursery place at The Mead Infant and Nursery School. I certify that I am the person with parental responsibility for the child named in Section 1 and that the information given is true to the best of my knowledge and belief. I understand that if I give any false or deliberately misleading information on this form and/or supporting documents, or withhold any relevant information, this may lead to the withdrawal of an offer of a nursery place for my child. I understand that it is my responsibility to provide full information to the nursery and that I will notify them of any changes to the details on this form or accompanying evidence as soon as they occur, including any change of address.  Signature of Parent/Carer:  Date:							

Personal Information Policy – We respect your rights and are committed to ensure that we protect your details and the information about your dealings with us. In accordance with the Data Protection Act 2018 and the General Data Protection Regulation (GDPR), we will use your information for the purpose of processing your application for a nursery place. We may share your information (but only the minimum amount of information necessary and only where it is lawful to do so) with Surrey County Council and other agencies (including schools, other councils, central government departments, law enforcement agencies, statutory and judicial bodies, contractors that process data on our behalf and medical advisors). We may also use and disclose information that does not identify individuals for research and strategic development purposes. You can find out more about how we manage your data on our website.