

St Pauls Nursery School Application Form

Sims

Register

Contact Info

Start Date

IPNS

eStart

Date Application Completed..... Completed by.....

Child's First Name:	Child's Last Name:	Date of Birth:
		Male / Female
Child's Home Address:		
Postcode:		
Telephone Numbers: Home - Mobile - Work -	Email Address:	
Name of Parent/Carer with whom child lives:		
Date of Birth:		
Medical Conditions:	Does your child have any additional needs? Is there anything else that you would like to tell us about your child or family?	
Allergies:		
Would you prefer: OPTION A/OPTION B/30 Hours (please circle which you would prefer)		
OPTION A Monday 8.30am-2.45pm Tuesday 8.30am-2.45pm Wednesday 8.30am-11.15am	OPTION B Wednesday 12.15pm-2.45pm Thursday 8.30am-2.45pm Friday 8.30am-2.45pm	
30 Hours(eligibility applies) 8.30am – 2.45pm Monday – Thursday 8.30am – 1.30pm Friday	Will you need any additional paid day care hours or holiday club?	

Ethnic Origin (Please tick the category which best describes your child)

Bangladeshi	<input type="checkbox"/>	Other Black African	<input type="checkbox"/>	White + Black Caribbean	<input type="checkbox"/>
Black- Somali	<input type="checkbox"/>	Traveller White Irish	<input type="checkbox"/>	White + Black African	<input type="checkbox"/>
Black- Caribbean	<input type="checkbox"/>	White – British	<input type="checkbox"/>	Any other Asian	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	White – Irish	<input type="checkbox"/>	Any other Black	<input type="checkbox"/>
Gypsy/Roma	<input type="checkbox"/>	White – Eastern European	<input type="checkbox"/>	Any other Ethnic Group	<input type="checkbox"/>
Indian	<input type="checkbox"/>	White – Western European	<input type="checkbox"/>	Any Other Mixed	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	White + Asian	<input type="checkbox"/>	Refused	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Other Black African	<input type="checkbox"/>	White + Black Caribbean	<input type="checkbox"/>

Child's First Language Please tick

Arabic

English

Panjabi

Polish

Somali

Urdu

Other (Please Specify)

Language mainly spoken at home

Do you speak English as well? Skip if English is language above

Yes

No

National Identity Please tick

British

English

Irish

Scottish

Welsh

Other

Refused

Are you a Refugee or Asylum Seeker?

Refugee

Asylum Seeker

Not applicable

What is your Religion? Please tick

Buddhist

Christian

Hindu

Jewish

Muslim

Rastafarian

Sikh

No religion

Other Religion

Access Needs: Do you need any help to access our school information?

Workless Households (tick the statement which you consider applies)

Currently nobody in my household is working

Somebody in my household is currently working

Parent's Signature:.....