



Working Together for Our Children

Carr Hill Road
Gateshead
Tyne & Wear NE9 5NB

Tel: (0191) 4771203
email: carrhillprimary@gateshead.gov.uk
website: www.carrhillprimary.org

Admission to School Nursery Class - Application Form

To start our nursery in Sept 2023 your child must have been born between 1/09/19 and 31/08/20

To start our nursery in Sept 2024 your child must have been born between 1/09/20 and 31/08/21

To start our nursery in Sept 2025 your child must have been born between 1/09/21 and 31/08/22

Child's Details

Name:	Date of Birth:
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Home Address:	
Postcode:	

Family/Home Details

	<u>Parent/Carer 1</u> who has Parental Responsibility	<u>Parent/Carer 2</u> who has Parental Responsibility
Your title <i>(delete as appropriate)</i> :	Mr / Mrs / Miss / Ms	Mr / Mrs / Miss / Ms
Your name:		
Relationship to child:		
Address (if different to child's address):		
Your phone no:	Home - Mobile -	
Your email address:		
Name (and relationship) of any other adults who live in your house:		
Will there be an older sibling attending Carr Hill when your nursery child starts: Yes / No		
If Yes, please give their name(s):		

Ethnic/Cultural Details

Ethnicity:		Home Language:	
Is English your child's first language?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, what is your child's first language?			

Additional Details

Do you have Social Worker involvement for your child?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, what is his/her name?		
What is the name of your child's Health Visitor?		
Are you aware of your child having any Special Educational Needs (eg Speech & Language)? If so, please detail here:		

Placement Preference

Whilst there is no guarantee that we can offer you the following provision, we still need to know what you would prefer. Please tick one box only for your most preferred option.

I would prefer:

- A morning session of 3 hours per day for 5 days
- An afternoon session of 3 hours per day for 5 days

Will Carr Hill be the only provider for your child's nursery provision? Yes No

If No, which other nursery will your child attend? _____

I confirm that the information I have given on this form is correct to the best of my knowledge. I understand that if I have given you false information you may withdraw the nursery place you have offered me.

Signature: (parent/carer)

Date:

One School, One Team and One Family



Headteacher: Paul Harris
Chair of Governors: Dr Jeanne Pratt

