



St Wilfrid's Catholic Nursery School Application Form



Legal surname:		Preferred surname:	
Legal first name:		Preferred first name:	
Middle names:		Date of Birth	/ /
Gender	M or F	Country of birth:	

Ethnicity (please circle):

Bangladeshi	Black African	Black Caribbean	Chinese	Filipino	Gypsy
Gypsy/Roma	Indian	Iranian	Iraqi	Kashmiri Pakistani	Kurdish
Pakistani	Roma	Traveller of Irish Heritage	White British	White and Asian	White and Black African
White and Chinese	White and Indian	White and Pakistani	White Eastern European	Other (please state):	

Nationality:

Religion (please circle):

Roman Catholic	Muslim	Christian	Jewish	Sikh	Baptist
Hindu	Methodist	No Religion	Other (please state):		

Home Language:

Is English a second language: Yes / No

Child's previous School/s or Nursery:	
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Home address of child:	
Postcode:	

Health Details:

Please mention anything that might affect your child's schooling. Does your child suffer from (please tick):

Visual problems (eg wears glasses)	Yes		No	
Hearing problems	Yes		No	
Speech problems	Yes		No	
An allergy (eg eczema, nuts, medicine)	Yes		No	
Asthma	Yes		No	
Diabetes	Yes		No	
Dietary requirements	Yes		No	
Any other	Yes		No	
If you answered Yes to any of the above questions, please give us more details:				

Special Educational Needs:

Has your child any special educational needs that should be noted and discussed? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Hours at setting:

Please tick hours & days

30 hours		Monday - Friday (30 hours)	
15 hours		Mornings only 08:45-11:45 (15 hours)	
Other (split provider)		Afternoons only 12:15-15:15 (15 hours)	
Paid place		Other, please specify below	

Other:

Parent full name	
Parent date of birth	
Parent National Insurance number	
30 hours funding code (if applicable)	

Parent/Carer Information:

We require a minimum of three contacts in case of emergency. Please state these in priority order. Thank you

First Contact	
Title:	
Name:	
Relationship to child:	
Home address (if different to child):	
Phone numbers (underline main contact number):	
Email address (essential for school communication):	

Second Contact	
Title:	
Name:	
Relationship to child:	
Home address (if different to child):	
Phone numbers (underline main contact):	
Email address (essential for school communication):	

Third Contact:	
Title:	
Name:	
Relationship to child:	
Home address (if different to child):	
Phone numbers (underline main contact):	
Email address (essential for school communication):	