



Diocese of Nottingham
In Partnership with
Derby City Council

ST. ALBAN'S CATHOLIC PRIMARY SCHOOL

Newstead Avenue
Chaddesden, Derby
DE21 6NU

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Headteacher
Head teacher
Kate Johnson
Deputy Head teacher
Matthew Blurton

Application for Admission to Foundation Stage One (Nursery)

PLEASE COMPLETE IN CAPITAL LETTERS

Pupil's Details

Surname			
First Forename		Second Forename	
Date of Birth			
Boy/Girl		Position in Family	
Home Address			
Postcode		Home Telephone No.	
Email Address			

Parent's/Guardian's Details

Father's Surname		Mother's Surname	
Father's First Name		Mother's First Name	
Father's Date of Birth		Mother's Date of Birth	
Father's NI/NASS No.		Mother's NI/NASS No.	
Father's Religion		Mother's Religion	
Occupation		Occupation	
Work Tel No.		Work Tel No.	
Home Address (if different from above)		Home Address (if different from above)	

Emergency contact Details

Name		Relationship to pupil	
Address		Telephone no.	

Please note, we will not allow children to be collected by anyone who is unknown to staff.

Names of adults who can collect my child	
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Background Information

Roman Catholic	Yes	No	Other Faith (Please state)	
If baptised, please provide a copy of your child's baptismal certificate				

Medical Details

Doctor's Surgery		Doctor's Tel No.	
Does your child:			
Wear glasses		Wear hearing aid	
Have an inhaler		Have an allergy to plasters	
Take any medicines		Have any SEN needs	

Are your child's immunisations up to date? Yes/No

Please state any medical conditions/asthma/allergies we should know about:
PLEASE LET US KNOW IF YOUR CHILD IS ALLERGIC TO ANYTHING

Ethnic Origin of Child (Required by DfE) – Please tick one box only.

White British	White Irish	White Traveller of Irish Heritage	White Gypsy/Roma	White Any other White background	Chinese
Mixed White and Black Caribbean	Mixed White and Black African	Mixed White and Asian	Mixed Any other mixed background	Asian or Asian British Indian	Asian or Asian British Pakistani
Asian or Asian British Bangladeshi	Asian or Asian British Any other Asian background	Black or Black British Caribbean	Black or Black British African	Black or Black British Any other Black background	Any other ethnic background

Nationality	
Country of Birth	
Language spoken at home	

Pre-School Experience

Playgroup/Nursery/Childminder attended	
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Declaration

I understand that the nursery will only receive Early Years Pupil Premium as long as I receive one of the relevant Support Payments. I will inform you immediately if my entitlement to any of the Support payments is terminated.

I understand that Derby City Council will hold the information on this application and use at least annually to check that the Early Years Pupil Premium should be paid to my child/children's nursery

I understand that Derby City Council will continue to hold the information on this form once my child/children have reached school age so that the Council can check if the school my child/children are attending is eligible for a Pupil Premium payment. I will inform you immediately if I change my address.

I declare that I am legally responsible for the child/children named in this application.

I certify that the above statement and information given by me on this form is complete and true and I authorise the Council to take such steps, as they consider necessary to verify the same. I understand that this may involve the Families Information Service contacting the HMRC or the Department for Work and Pensions for confirmation of my/our entitlement.

A deliberate false statement may lead to prosecution

All information provided will be treated in accordance with the Data Protection Act 1998 and only used for checking your child's eligibility for the Early Years Pupil Premium and Pupil Premium. To check eligibility the Council will need to share your information with the Department of Education and HMRC. The Council may also share the information with other department within the Council and other public bodies such as the Audit Commission for the purpose of preventing fraud, misuse of public funds and any legal or statutory requirements.

All claims are checked on an online checking system provided by the Department of Education. This only confirms or denies your eligibility to claim Early Years Pupil Premium or Pupil Premium: It does not give us any other information. When you eligibility has been confirmed and your application processed we will contact the nursery / school directly regarding your child's eligibility.

Signed: (Mother) Date:

Signed: (Father) Date:

Requested nursery sessions:

Monday am/pm Tuesday am/pm Wednesday am/pm Thursday am/pm Friday am/pm