**SS PETER AND PAUL CATHOLIC PRIMARY SCHOOL’S NURSERY SUPPLEMENTARY INFORMATION FORM 01 SEPTEMBER 2025 - 31 AUGUST 2026**

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| **First Name** | **Surname** |
| **Date of Birth*****(All applicants are required to produce a birth certificate)*** | **Gender** |
| **Home Address****Post Code** | **Telephone number** |
| ***The child’s home address is considered to be the address where the child normally lives. Where care is split and a child moves between two addresses please see note (c) on the nursery’s******admission policy.*** |
| **Parent(s)/Guardian(s) Information:** |
| **Name: Relationship** | **Name: Relationship** |
| **Address if not as above** | **Address if not as above** |
| **Telephone number** | **(home)****(mobile)** | **Telephone number** | **(home)****(mobile)** |
| **National Insurance Number**[**1**](#_bookmark0) | **D.O.B[2](#_bookmark1)** | **National Insurance Number** | **D.O.B** |
| **Childcare Application** |
| Are you applying for a free universal 15-hourplace? (term after your child turns 3) | Yes/No |  |
| Are you applying for funded 30-hour place? If yes, provide eligibility code? (3 year olds, eligible working families) | Yes/No | 30-hour eligibility code: ………………………………………. |
| Are you applying for additional self -funded (top up) places at £5.50 per hour? If yes, how many hours per week do you want to pay for? | Yes/No |  **………………..** |
| Are you applying for completely self-funded places at £5.50 per hour? | Yes/No |  |
| **I wish SS Peter and Paul Catholic School to be the setting which claims the nursery grant for my child.****Signed……………………………………………………..Parent/Guardian Date…………………………****If you are using more than one setting, please provide details here:****Setting Name:****Hours spent in setting:****Please note you will be required to sign a termly declaration form to confirm which setting can claim the nursery grant for your child.** |

 1 National Insurance Numbers will only be used to ascertain entitlement to additional funding your child might be eligible for.

2 Parent/Guardian’s D.O.B will only be used to ascertain entitlement to additional funding your child might be eligible for.

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| **English as an Additional Language**Is your child an EAL learner? Yes / No*This includes anyone who has been exposed to a language other than English during early development ‘and continues to be exposed to this language in the home or in the community.*If so which languages(s) are they exposed to? ……………………………………………………………………………………………………..**Siblings in School** |
| Does the child already have a sibling in the school, if so who?....................................................................... |
| **Sibling is defined in these arrangements as full, half or step brothers and sisters, adopted and foster brothers and sisters who are****living at the same address and are part of the same family unit. See note (d) of the nursery’s admission policy.** |
| **Child’s Religion** |  |
| Religion…………………………………………… | Present parish/church……………………………. |
| ***For Catholic children only:*** |  |
| Is your child baptised?....................................... | Date of baptism…………………………………… |
| Church of baptism………………………………… | In which town……………………………………… |
| **All Catholic applicants are required to provide written evidence of baptism, such as a baptismal certificate. This evidence must be****attached to this form and be submitted before the application deadline. See note (b) of the nursery’s admission policy.** |
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| **School use only:** |  |
| SIF | Date………………. | Signed………………….. |
| Birth certificate checked | Date………………. | Signed………………….. |
| Evidence of baptism received & copied | Date………………. | Signed………………….. |