



APPLICATION FOR ADMISSION TO SAPLINGS CLASS (NURSERY)

Parent / Carer name: _____

Name of child: _____

Date of birth: ____/____/____

Address: _____

Postcode: _____

Telephone numbers: Home: _____ Mobile: _____

Email address: _____

Gender: Boy / Girl Position of child in family (e.g. B $\text{\textcircled{G}}$ B): _____

Date of Application: ____/____/____

Signed _____ Parent/Guardian

Having a place in Glapton's Nursery does not guarantee you a space in our school and all families must apply for a place in F2 Class.

Office use only:

Seen birth certificate: Initial: Date:	Acknowledgement letter Date sent:	Place offered: Yes / No Date letter sent:
Date confirmation received from parent:	Start date given to parent: Session: AM / PM	Child started: Yes / No Date: