

Nursery Enquiry Form

Date of enquiry:							
Child's First Name: Child's Surname:							
Child's Date of Birth: Gender: Male □ Female □							
Child's Address:							
Postcode:							
Parent/Guardian Name: Telephone Number:							
Email address:							
Does your child have a sibling attending Cherry Lane Primary School					Yes □	No	
If yes, Name of Child & Class							
Will Cherry Lane Primary School be your first preference for your child when they start full-time school? Yes □ No □							
Preferred Session (please tick one)							
15 hours per week 8.30am-11.30am □ 12.30pm-	-3.30pm		Eith	er 🗖			
30 hours per week 8.30am - 3.30pm ☐ (please do not tick unless you meet the eligibility criteria below)							
Parents will be charged £5 per day to cater for the lunch hour; this will include a school meal. Places will be offered on a first-come, first-serve basis.							
Eligibility Criteria for 30 hours per week: Both parents must be in work, as defined below, and for single parent families, the sole parent must be in work. For the purposes of this scheme, 'in work' is defined as being in employment (including self-employed) and earning more than the equivalent of the minimum wage for working 16 hours a week (£120 per week- as at April 2017) Each parent must also earn less than £100,000 per year. One parent must be 'in work' if the other receives disability benefit or benefits related to caring responsibilities. Please note that this is a government proposal and Cherry Lane Primary School does not have any control over the eligibility criteria.							
FOR OFFICE USE ONLY Added to Waiting List	Yes		No				
Input onto Sims	Yes		No				
Offer Made	Yes		No				
Acceptance Returned Session Offered 15 hours	Yes		No				
Session Offered 15 hours 30 hours	AM Yes		PM No				
30 hour entitlement code	Code:		110				
Application Form Sent	Yes		No				
Application Form Returned	Yes		No				
PP Form Sent	Yes		No				
PP Form Returned	Yes		No				
Nursery Policy & Information Sent Birth Cert/Passport Received	Yes Yes		No No				
Start Date Letter Sent	Yes	<u> </u>	No				
Start Date Accepted	Yes		No				
Home Visit (if applicable)	Date:		1	_			
Pupil File created	Yes		No				
UPN Assigned/Received	Yes		No				
Medical/SEN (if known)							
Other Information:							