

Application for admission to a Surrey community or voluntary controlled nursery in September 2025



Maybury Primary School
Walton Road WOKING
Surrey GU21 5DW

Tel: 01483 763272
Email: info@maybury.surrey.sch.uk

Nursery Application Form

In order to be considered in the initial allocation of Nursery places this form should be returned to school by **31st March 2025**

- Please note that completing this form does not guarantee a place
- Please read the Nursery Admissions policy before completing this form
- **The school manages our own Nursery admissions. By attending our Nursery this does NOT automatically entitle you to a place in Reception.**
- If you believe you meet the criteria for 30 hours free entitlement for 3-4-year-old children, you must obtain an 11-digit eligibility code from HMRC - see www.surreycc.gov.uk/30hourschildcare for details of how to apply. We need this code before we can offer a 30-hour place in the nursery. Please fill in the form in block capitals and sign it
- Please return to the school by the closing date
- You will be notified by the school if your child has been allocated a place after the closing date
- Please contact the school if you have any queries concerning completion of this form.
- Please complete and return to the school office with a copy of the Birth Certificate/Passport

| 1. Child's Details | | |
|---|----------|---------------------|
| Child's Last Name: | | |
| First Name: | | |
| Middle Name: | | |
| Child's Date of Birth: | | Gender: Male/Female |
| Child's Home address: (this must be the child's normal place of residence and not a relative or carer's address) | Postcode | |

| 2. Parents/Guardians/Carer's Details | | |
|---|----------------------|----------------------|
| Title: | Mr/Mrs/Miss/Ms/..... | Mr/Mrs/Miss/Ms/..... |
| Surname: | | |
| First Name: | | |
| Relationship to Child: | | |
| Address (if different from that of the child given above) | | |
| Daytime telephone number: | | |
| Mobile telephone number: | | |
| Email address: | | |

| | | |
|---|---------------|-------------|
| Emergency Contact Telephone Numbers if unable to contact parent: (e.g. relative, neighbour) | Name: | Home Tel: |
| | Relationship: | Mobile Tel: |
| | Name: | Home Tel: |
| | Relationship: | Mobile Tel: |

| | |
|--|----------------------------|
| Is your child currently attending a nursery (If yes please provide name and address) Y <input type="checkbox"/> N <input type="checkbox"/> | Please tick in this column |
| Looked after and previously looked after children (If the child is already in public care of a local authority or has previously been in care, please state which Local Authority and provide evidence with your form). If there has been any involvement with Children's Services please provide information including dates etc: | |
| Looked after and previously looked after children (If the child is already in public care of a local authority or has previously been in care, please state which Local Authority and provide evidence with your form). If there has been any involvement with Children's Services please provide information including dates etc: | |
| Where there is a social or medical need for a place at the nursery school (E.g. does your child have any special education needs, special social needs or a disability? Are they supported by Social Services, a Speech Therapist, Educational Psychologist, Portage or Child and Family Guidance? An application will not be considered under this criterion unless independent evidence is provided. As such, please provide further details together with any relevant documentation): | |
| Where a child has a sibling attending the main school at the time of admission or is expected to have a sibling attending the main school. Please provide name(s) and date(s) of birth of siblings and year group(s) expected to be in at September 2021. 1. Name _____ Year Group _____ 2. Name _____ Year Group _____ 3. Name _____ Year Group _____ | |
| Children who will be eligible for FEET funding the term after their 2nd Birthday (these children will be able to stay on in Nursery for two further years in 2020/21 and 2021/2022 and will be due to start Reception in September 2022) FEET Application No: Please see FEET information Surrey County Council - https://www.surreycc.gov.uk/people-and-community/family-information-service/choosing-childcare-for-children-and-young-people/paying-for-childcare/free-early-education-for-2-year-olds-feet | |

4. Nursery Sessions

Please note: All three year olds are entitled to 15 hours of free entitlement (the term after their third birthday) per week in term time.

You may also be entitled to an additional 15 hours (totalling 30 hours) per week in term time when:-

- Both parents (or sole parent in single parent family) are in paid employment, each must have a weekly minimum income equivalent to 16 hours of work at minimum wage or living wage and earn no more than £100,000 per annum. For more information, please visit www.surreycc.gov.uk/30hourschildcare.

If you are applying for the 15 hours of entitlement only, please fill in the box below.

(Top up sessions are available at cost subject to availability, please enquire).

| Please indicate your preferred sessions by stating 1st, 2nd, 3rd and 4th as your choice in the box | | Please indicate preference in this column |
|--|---|---|
| 1 | Five morning sessions Monday-Friday 8.30am-11.30am = 15 hours | |
| 2 | Five afternoon sessions Monday-Friday 12.15-3.15pm = 15 hours | |

OR, If you are applying for the 30 hours of extended entitlement please fill in the box below

| | | |
|---|---|--|
| 3 | All Day Monday to Friday 8.30am – 3.15pm = 30 Hours free due to eligibility for 30 hours free entitlement. Eligibility code shown below*. (subject to availability) | |
| Parent/carer National Insurance Number: | | 30 hours eligibility code (11 digits): |
| 4 | All Day Monday to Friday but NOT eligible for 30 hours, so 15 hours funded and 15 hours fee paying at £15 per session and subject to availability | |

(*30 hours will be subject to an eligibility check)

All places will be allocated in accordance with Nursery Admissions Policy. Please note: Preferences cannot be guaranteed as sessions are allocated subject to availability which may result in your child being offered a place at either one of the session options outlined above.

5. Medical Information

| | | | | |
|--|---------|--------------------------|-------------|----------|
| Name of Doctor: | | Address of Doctor: | | |
| Doctor's Tel: | | | | |
| Any known problems in: (*please delete as applicable) | | | | |
| Hearing | *YES/NO | Hearing Aid Worn | *YES/NO | Details: |
| Vision | *YES/NO | Glasses Worn | *YES/NO | |
| Speech | *YES/NO | Dominant Hand | *Left/Right | |
| Allergies | *YES/NO | If 'YES' please specify: | | |
| Any Other Health Problems: (e.g. Asthmas, Diabetes etc) | | Please specify: | | |

| | | | | | | | |
|---|--|------------------|--|--------------------------------|--|-------------------|--|
| 6. Personal Information | | | | | | | |
| Dietary Needs (Please indicate below) | | | | | | | |
| Halal foods only Not allowed pork | | Not allowed beef | | Vegetarian food only | | Kosher Foods only | |
| How will the child get to school (please tick as appropriate) | | | | | | | |
| Bus | | Car Share | | Train | | | |
| Car | | Cycle | | Walk | | | |
| Religion: | | | | | | | |
| Main language spoken at home: | | | | First Language spoke to child: | | | |

| | | | | | | | |
|---|--|----------------------------|--|------------------------------|--|--|--|
| 7. Information for the Department of Education - Ethnic Origins (please tick as appropriate) | | | | | | | |
| Asian or Asian British: | | Black or Black British: | | Chinese or Chinese British: | | | |
| Bangladeshi | | African | | Chinese | | | |
| Indian | | Caribbean | | Any other Chinese background | | | |
| Pakistani | | Any other Black background | | | | | |
| Any other Asian background | | | | | | | |
| Mixed: | | White: | | | | | |
| White and Asian | | British | | Welsh | | | |
| White and Black African | | English | | Gypsy Roma | | | |
| White and Black Caribbean | | Irish | | Any other white background | | | |
| Any other mixed background | | Scottish | | | | | |
| I do not wish an ethnic background category to be recorded | | | | | | | |

| | | |
|---|----------------------|----------------------|
| 8. Early Years Pupil Premium (EYPP) Registration Form | | |
| <p>The Early Years Pupil Premium is an additional sum of money paid to childcare providers for children of families in receipt of certain benefits. This funding will be used to enhance the quality of their early years' experience by improving teaching and learning and facilities and resources, with the aim of impacting positively on your child's progress and development. For Further details see https://www.surreycc.gov.uk/people-and-community/family-information-service/education-and-learning-advice-for-families/early-learning/parents-guide-to-the-early-years-foundation-stage/early-years-pupil-premium</p> <p>Please complete the details below:</p> | | |
| Parent/Carer details | | |
| Title: | Mr/Mrs/Miss/Ms/..... | Mr/Mrs/Miss/Ms/..... |
| Surname: | | |
| First Name: | | |
| *National Insurance Number: | | |
| * Date of Birth: | | |
| I wish the school to claim EYPP | | |
| Signature(s): | | |

9. Additional Information, e.g. special educational needs, delayed speech.

Any additional information you would like to share?

10. Permission for short walks

Occasionally short walks are organised by the school to local places of interest as part of their learning experience. These walks are always assessed before they are undertaken.

I give permission for my child to take part in short walks to local places of interest:

Signature of Mother:

Date:

Signature of Father:

Date:

Parent/Carer Declaration and Signature of Parent/Carer:

I wish to apply for a place at Maybury Primary School Nursery and I have indicated the criterion under which I am applying for that place.

I certify that I am the person with parental responsibility for the child named in Section 1 and that the information given is true to the best of my knowledge and belief.

I understand that if I give any false or deliberately misleading information on this form and/or supporting documents, or withhold any relevant information, this may lead to the withdrawal of an offer of nursery school place for my child. I understand that the school reserves the right to amend its provision of nursery.

Signature of Mother:

Date:

Signature of Father:

Date:

Please provide the school office with a copy of your child's Passport or Birth Certificate.

Privacy Notice (How we use pupil information)

Maybury Primary School is compliant with the General Data Protection Regulation which means we seek your specific consent to use the data we are collecting within this Admissions Form for the purposes as detailed within the Privacy Policy on the School website. We request that you sign this form to confirm that you are giving us your specific consent for the use of this data for the specific purposes outlined only."

Signature: _____ **Date** _____

Name of child: _____

| Office Use Only | | | | | |
|---------------------------|--|------------|-----|----------------------|-----|
| Copy of birth certificate | | FEET Check | Y/N | 15 Hour top up check | Y/N |
| Added to waiting list | | Date: | | Initials: | |

Privacy Notice - Data Protection Act 2018

We Maybury Primary School are the Data Controller for the purposes of the Data Protection Act. We collect information from you, and may receive information about you from your previous school. We hold this personal data and use it to:

- support your teaching and learning;
- monitor and report on your progress;
- provide appropriate pastoral care, and
- assess how well your school is doing.

This information includes your contact details, national curriculum assessment results, attendance information ^A, characteristics such as ethnic group, special educational needs and any relevant medical information.

We will not give information about you to anyone outside the school without your consent unless the law and our rules permit it. We are required by law to pass some of your information to the Local Authority (LA), and the Department for Children, Schools and Families (DCSF).

If you want to see a copy of the information we hold and share about you then please contact the school office on 01483 763272.

If you require more information about how the LA and/or DCSF store and use this data please go to the following websites:

- http://sccchna1.surreycc.gov.uk/sccwebsite/sccwspages.nsf/LookupWebPagesByTITLE_RTF/Publications+and+records?opendocument , and
http://www.teachernet.gov.uk/_doc/13856/DCSF%20what%20we%20do%20with%20Children's%20data%20v4%20final.doc

If you are unable to access these websites, please contact the LA or the DCSF as follows:

- Corporate Information & Governance Team
Surrey County Council
County Hall
Penrhyn Road
Kingston upon Thames
KT1 2DJ
website: www.surreycc.gov.uk
email: foi@surreycc.gov.uk
tel: 08456 009 009
- Public Communications Unit
Department for Children, Schools and Families
Sanctuary Buildings
Great Smith Street
London
SW1P 3BT
website: www.dcsf.gov.uk
email: info@dcsf.gsi.gov.uk
tel: 0870 000 2288

^A Attendance information is not collected for pupils under 5 at Early Years Settings or Maintained Schools