



# 2025/2026 APPLICATION FOR 3 YEAR OLD ENTRY AT KESTON PRIMARY SCHOOL NURSERY

(For parents / carers whose child will be 3 years old before the 31st August 2025)

## Child and parent/carer details

Child's surname:		Child's first name:	
Date of birth:		Male / Female	
Main language(s) spoken at home:			

## Name of person with parental responsibility (parent/carer):

Surname:		First name:					
Mr		Mrs		Miss		Ms	

Home address of child and parent/carer:	
Postcode:	
Home telephone:	
Mobile telephone:	
Work telephone:	
e-mail address:	

Date moved to this address:	
Are you on the electoral roll at the above address:	Yes / No

Is your child attending any other childcare arrangements, e.g. childminder / nursery:	Yes / No
If Yes please give details:	
How did you hear about us?	

**THIS FORM SHOULD BE RETURNED TO THE OFFICE FOR THE ATTENTION OF MRS STOREY BY 17<sup>th</sup> JANUARY 2025**

## 1. Looked after children/children in public care

Is the child named in section 1 in public care or looked after? (i.e. in the care of a local authority, resident with a foster carer or in a children's home / adopted subject to a residence order or special guardianship order, immediately following having been looked after). If your child meets the criteria to be classified as a looked after child or a child in public care, you must enclose either a letter from the relevant authority confirming the legal status of the child, a copy of the care order, or a copy of the special guardianship order. Please note that children adopted from overseas are not classified as children in public care.

No		Please proceed to question 2
Yes		Please provide the details below
Name of assigned Social Worker:		
Contact number:		
Local Authority with whom the child is in care:		
Date of which the child took up residence at the address quoted in part 1:		

## 2. Sibling details

If you have an older sibling/s who will be attending Keston Primary School at the same time as the child on this application, please give details:

Sibling's full name:	
Date of birth:	
Boy / Girl:	
Current Registration group:	

Sibling's full name:	
Date of birth:	
Boy / Girl:	
Current Registration group:	

## 3. Special case priority (including medical)

If there are any special reasons which make your child's admission to Keston Primary School Nursery particularly desirable, please outline them below. You should include any medical, social or educational factors or any other relevant information:

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Please attach separate sheets if necessary

I attach a letter of support from the person named below, who may be contacted about my application:

Name:		Tel:	
Professional Status:			
Address:			

**4. Children of members of staff**

Children of members of staff will have priority in the oversubscription criteria if the staff member has been employed at the school for two or more years at the time at which the application for admission to the school is made, and/or if the member of staff is recruited to fill a vacant post for which there is a demonstrable skill shortage.

**5. Distance**

Children living closest to the school as measured in a straight line from the child’s main address to the school gate will receive higher priority.

**6. Application options – please tick where appropriate**

		Please
1	I am likely to qualify for free thirty hours, 3-year old entitlement and would like to take up this option <i>(NB: Eligibility criteria applies, please see <a href="http://www.gov.uk">www.gov.uk</a> for 30 hour funding information)</i>	<input type="checkbox"/>
2	I would like to request a 15-hours place, which will be taken in the mornings <i>(NB: this is an automatic entitlement for any 3 year old child)</i>	<input type="checkbox"/>
4	I will need additional paid sessions on top of my 15 funded hours - See Section 7 <i>(NB: 15 hours are automatically given across 5 mornings, meaning any child staying all day will need to ‘top up’ with paid sessions if not using/entitled for 30hour funding)</i>	<input type="checkbox"/>

**7. Additional afternoon sessions**

Please indicate your request by ticking the appropriate boxes i.e 3 days:-

- All applications will be considered on a first come/first served basis.
- Full time (5 days a week) children will be given a preference
- Any other places will then be considered in order for 4 day / 3 day / 2 day / 1 day attendance.

You may indicate a 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> day preference.

Monday	Tuesday	Wednesday	Thursday	Friday

These sessions will be funded by (please tick as appropriate)

Government funded 30 hours allocation. Please see the following website for further details of this scheme: <a href="https://www.gov.uk/30-hours-free-childcare">https://www.gov.uk/30-hours-free-childcare</a>	
Invoice paid via ParentPay (paid in advance each half term)	
Childcare vouchers	
Tax Free Childcare. Please see the following website for further details of this scheme: <a href="https://www.gov.uk/tax-free-childcare">https://www.gov.uk/tax-free-childcare</a>	

## 8. Early Years Pupil Premium

Early Years Pupil Premium (EYPP) Registration Form:

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 the teaching and learning and facilities and resources, with the aim of impacting positively on your child's progress and development. For more information please speak to your childcare provider.

If you believe your child may qualify for this EYPP please complete the attached form to enable us to confirm eligibility.

## 9. Declaration

I confirm the information supplied is correct:

I wish to apply for a place at Keston 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 the form and/or supporting documents, or withhold any relevant information, this may lead to the withdrawal of an offer of a nursery school place for my child. I understand that the school reserves the right to amend its provision of nursery.	
Full name of parent/carer (please print):	
Signature:	
Relationship to child:	
Date:	