City of Bradford Metropolitan District Council

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Cottingley Village Primary Nursery Application Form

Child	PLEASE WRITE IN BLOC		CK Surname			
Details:	CAPITALS					
First Name			Middle Name			
Date of Birth			Male/Female			
Address				1		
Postcode			Telephone No.			
Nationality			Home Language			
Pre School currently attending (if any): →						
Is the child a Looked After Child by the Local Authority?		Yes □	No □ If so please attac		details/evidence	
Does the child have a statement of special needs?		Yes □	Yes □ No □ If so		f so please attach details/evidence	
Does your child have a sibling already attending the nursery or		Sibling(s) names and dates of birth:				
school?		Name			D.O.B.	
Yes □ (please supply details) →						
No □						
110						
Parent/Guardian details						
Address:						
Title:			Surname			
Mr/Mrs/Miss/Ms			B			
First Name			Relationship Mother/Father etc			
Home No.			Mobile/work telephone number			
Preferred Sessions: Please ✓ your choice →			AM Session □			
Signature of Parent/Guardian:				Date:		
Once you have fully completed this form please hand it in to the school nursery class you require The information on this form will be used only for the purposes of allocating nursery places. The data will be processed in compliance with the Data Protection Act.						

Please note:

The offer of a place at a nursery class attached to a primary school does not guarantee the child a place in the reception class at the same school. A fresh application will be required in accordance with the criteria for admission to reception classes.