



Emmaville Primary School

Crawcrook, Ryton
Tyne & Wear
NE40 4ND

☎ Telephone & Fax: 0191 4132460
emmavilleprimaryschool@gateshead.gov.uk

Head: Avril E. Armstrong

Dear Parents/Carer,

Please find enclosed our Application form for Nursery admissions 2021 / 2022.

If you would like to request a place at our Nursery, please fill in the application form and return it to school by **Monday 8th February 2021**.

Please note, you need to apply now for ALL children that are eligible for a place to start in either September 2021, January 2022 OR April 2022. We can offer places in January 2022 and April 2022 depending on our intake in September 2021.

You will then be informed in writing if your child has a place.

Please don't hesitate to get in touch if you have any more questions,

Best Wishes from Katherine Wallace
EYFS Coordinator

Application Form
Admission to Emmaville Primary School Nursery Class
Closing Date for Applications: Monday 8th February 2021

Your Child's Details

Name: _____ Date of Birth: _____

Gender: Male ☐ Female ☐

Parental Address _____

Post Code: _____

Is your child in public care, i.e. looked after by a council? Yes ☐ No ☐

If yes, which council looks after your child? _____

Name of Social Worker _____

Does your child have a statement of special educational need? Yes ☐ No ☐

Is English your child's home language? Yes ☐ No ☐

If no, what is your child's home language? _____

Does your child attend another setting nursery? If so, please can you state where they attend. This is so we can visit your child in their settings prior to inductions at Emmaville Primary School

Your Details

Title: for example Mr/Mrs/Miss/Ms

Name: _____

What is your relationship to the child?

Parent ☐ Legal Guardian ☐ Foster Carer ☐ Social Worker ☐

Home Phone:

Mobile Phone:

Email address:

Requested pattern of provision:

If you are entitled to the extended 30-hour provision* your child can attend for the full 30 hours (Monday - Friday 9am - 3pm),

OR a pattern of attendance between 16 hours and 30 hours. Please specify which mornings and afternoons you would PREFER. We will do our best to accommodate all patterns. Please note, that your child's pattern of attendance cannot change from week to week.

If you are only entitled to 15 hours' provision, please specify which pattern of attendance you would PREFER:

Mornings only, afternoons only or two and a half days; either Monday, Tuesday and Wednesday morning OR Wednesday afternoon, Thursday and Friday.

Please indicate by ticking in the relevant boxes below which sessions you would require:

Day	Morning (9am-12pm)	Afternoon (12pm -3pm)
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

*You can check your eligibility for 30-hour nursery provision by going on the Government website:

<https://www.gov.uk/30-hours-free-childcare>

Signature

I confirm that the information I have given on this form is correct to the best of my knowledge. I understand that if I have given you false information you may withdraw the nursery place you have offered me.

Your full name (Print) Mr/Mrs/Miss/Ms

Parent/Guardian Signature _____ Date: _____