![Master logo RED[1]]()



**Abbey Wood Nursery School & Children’s Centre**

**Dahlia Road, Abbey Wood, London SE2 0SX**

**Headteacher: Ms Clare Barber**

**Tel: 0208 311 0619 Fax: 0208 312 0319**

**Email:** **headteacher@abbeywood-nur.greenwich.sch.uk**

**Application for Admission**

**Date**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** |  | **Surname** |  |
| **Date of Birth** |  | **Boy/Girl** |  |
| **Full name of parent(s) or adult(s) with whom child lives:****……………………………………………………………………………………..Relationship to Child:…………………………………………****……………………………………………………………………………………….Relationship to Child:……………………………………….** |
| **Home Address:****Post Code:** |
| **Home Telephone Number:** | **Mobile Telephone Number:** | **Work Telephone Number:** |
| **Full name and address of parent if separated:** |
| **Childminder’s Address (please supply photocopy of contract with application):** |
| **GP/Health Visitor:****2½ year check? Yes………. No……….** |
| **Special Needs (e.g developmental delay, speech delay, medical condition)** |
| **Need for Place (e.g. poor accommodation, lack of garden, child care difficulties)** |
| **Is there any other information you would like to share with us?** |

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| **OTHER CHILDREN IN FAMILY** |
| **Name** |  | **D.O.B** |  | **School** |  |
| **Name** |  | **D.O.B** |  | **School** |  |
| **Name** |  | **D.O.B** |  | **School** |  |
| **Name** |  | **D.O.B** |  | **School** |  |
| **Name** |  | **D.O.B** |  | **School** |  |

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| **Please Tick Ethnicity** |
| Black AfricanGhanaian/Nigeria |  | Black Caribbean |  | Other Black |  | White English/Scottish/Welsh |  |
| White Irish |  | White European |  | Other White |  | Bangladeshi |  |
| Chinese |  | Indian |  | Pakistani |  | Vietnamese |  |
| Other Asian |  | Turkish/Turkish Cypriot |  | Other |  | Mixed Origin |  |

|  |  |
| --- | --- |
| Home Religion |  |
| Language(s) spoken at home |  |
| Has the family refugee status |  |
| Are you working full time? |  |
| Are you working part time? |  |
| Are you in further education? | Full Time ………. Part Time ………. |

**General Information**

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| --- |
| Eligibility criteria for pupil benefits |
| Do you claim Employment and Support Allowance (Income Related) |  |
| Income Support |  |
| Income Based Job Seekers Allowance |  |
| Child Tax Credit (NOT Working Tax Credit) and annual income below the relevant threshold |  |

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| --- |
| Any other agencies involved with your family? |
| Name of Intended Primary School: |
| How would you travel to the Centre (please circle)Walk Car Bus Train Cycle |
| How did you hear about the Centre? |

I agree that the school can contact to request information from any other service who may be involved.

Signed…………………………………………………………………………….Date……………………………………………