



**FAIRCHILDES
ACADEMY
COMMUNITY
TRUST**



Monks Orchard Primary School
The Glade, Shirley, Croydon, CR0 7UF
Tel: 020 8654 2570
Email: office@monksorchard.co.uk
Website: www.monksorchard.co.uk

Executive Headteacher: Miss R. Sandell

Headteacher: Guy Fairbairn

NURSERY APPLICATION FORM 2019/2020

WHAT YOU NEED TO KNOW ABOUT 3 AND 4-YEAR-OLD FUNDING

Please read this information carefully. This will help you to understand how the funding works and how you can access a free nursery education place at Monks Orchard.

All 3 and 4 year olds are eligible for a free core 15 hour per week early education place from the term following their 3rd birthday (at Monks Orchard, they must be three years old by 31 August 2019 for the September intake).

Some 3 and 4 year olds also qualify for an additional 15 hours per week, totalling 30 hours per week. Parents who may be entitled to the 30 hours free childcare can access further information by checking their eligibility on the Government's website at www.childcarechoices.gov.uk. Otherwise, fees are currently charged at £95 per week and payable in advance half-termly.

3 AND 4-YEAR-OLD FUNDED PLACES AT MONKS ORCHARD

Universal 15 Hours

Parents can access the universal 15 hours at Monks Orchard by attending as follows: -

Red A

(Mondays, Tuesdays all day (9am-3pm) and Wednesday mornings (8.45-11.45am)).

Red B

(Wednesday afternoons (12-3pm), Thursdays and Fridays all day (9am-3pm)).

Full time

Places are available Monday-Friday 9am-3pm.

NURSERY APPLICATION FORM 2019/2020

CHILD'S DETAILS

SURNAME: _____

ADDRESS: _____

FIRST NAME(S): _____

DATE OF BIRTH: _____

BOY OR GIRL: _____

PARENT/CARER(S) DETAILS

MOTHER

SURNAME: _____

ADDRESS (if different from Child's)

FIRST NAME: _____

HOME TELEPHONE: _____

MOBILE NO: _____

EMAIL ADDRESS: _____

FATHER

SURNAME: _____

ADDRESS (if different from Child's)

FIRST NAME: _____

HOME TELEPHONE: _____

MOBILE NO: _____

EMAIL ADDRESS: _____

PARENTAL RESPONSIBILITY

Who has parental responsibility for your child? Mother Father Both

CHILDREN IN PUBLIC CARE

Is your child in public care? Yes No

If yes, please state which Local Authority: _____

OTHER CHILDREN

Names and ages of other children in the family:

Please state where they go to school: _____

Please turnover.....

LANGUAGE

What is your child's first language? _____

What other languages are spoken or heard at home? _____

PREVIOUS SCHOOL/PRE-SCHOOL

Please tell us the names of any previous school your child has attended:

SPECIAL NEEDS

Has your child any identifiable special needs? If so, would you please supply us with details?

Are there any other professionals involved? If so, please give names.

SPEECH

Are you worried about your child's speech? _____

Has your child been referred for speech therapy? Yes No

MEDICAL NEEDS

Does your child have a medical condition we should know about?

Is your child toilet trained? Yes No

Please give us an indication of the type of place you think you may need by ticking one of the boxes below:

<input type="checkbox"/> Red A	<input type="checkbox"/> Red B	<input type="checkbox"/> Full Time
Mondays, Tuesdays all day and Wednesday mornings	Wednesday afternoons, Thursdays and Fridays all day	Mondays – Fridays all day (30 hours)

Parent/Carer's signature: _____ Dated: _____

**Please complete and return this form to the school office by 15 January 2019
PLEASE RETURN THIS FORM DIRECT TO MONKS ORCHARD SCHOOL OFFICE**