

GARFORTH SCHOOL PARTNERSHIP TRUST NURSERY GROUP

APPLICATION FORM

This form should be used for requesting a place in a Garforth School Partnership Trust (GSPT) nursery. Please read carefully the booklet and admissions policy accompanying this form before making your nursery preferences. You are also strongly advised to arrange to visit the nurseries you are considering.

You should complete the form as fully as possible and then return it to either one of the nurseries or else to the nursery admissions officer:

**Mr J. Carr, Admissions Officer, GSPT Nurseries,
c/o Garforth Academy, Lidgett Lane, Garforth, Leeds, LS25 1LJ**

email: carrjd01@leedslearning.net

If you need any advice on the GSPT nursery admissions policy or help filling in this form, please contact John Carr on 07931692954.

Details of child

Name: ----- boy / girl

Date of birth -----

Home address -----

Parent/Carer's name -----

Relationship to child -----

Who has parental responsibility for the child -----

Phone No. Day ----- Evening -----

Mobile Phone: -----

E-mail -----

Is your child in public care? Yes / No

Nursery preferences

List three nurseries in order of preference. Please read carefully the admission policy and advice so that your selection is realistic. You will be offered a place at only one nursery.

Preference 1 -----

Preference 2 -----

Preference 3 -----

When would you like your child to start at nursery?

✓ to indicate choice

September

January

April

Other details about your child

- Does your child have special needs? If so, please give details and include evidence with your application (copy of statement or letter from doctor etc.)

- Any other relevant information, including name and date of birth of older siblings in the primary school:

I certify that the information I have provided on this form is accurate, to the best of my / our knowledge.

Signed: -----

Relationship to child: -----

Date: -----