

Lane Green First School

Headteacher: Mr Tom Wright

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> E-mail: headteacher@lanegreen.staffs.sch.uk School Website: <u>www.lanegreen.staffs.sch.uk</u>



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Application for Admission to Lane Green First School Nursery Setting

Before completing this form, you should read the nursery admission arrangements provided on our website at www.lanegreen.staffs.sch.uk. You should complete and return your application form to the school.

CHILD'S DETAILS					
Child's Legal Surname	e:	Date of Birth:			
		Birth Certificate S	een/Not Seer	1	
Child's Legal First Na	me:	☐ Male: ☐ Fei	male: \square		
Full Postal Address: (including postcode)					
	NB: it is your responsibility to advise u	s immediately if these deta	ails change.		
Is your child a twin of	triplet, etc (one of multiple birth)?	Yes No			
If yes, please provide	the names of related applications:				
Is this shild in the care	of a local authority?	Please tick each box	as appropriate	Yes	No
Is this child in the care of a local authority?					
	sly been in the care of a local autho a residence order or special guard				
	er of the above, please provide S			conta	ct
details in the box be	low:				
D 41: 1311		/ELIOD			
Does this child have a	in Education, Health and Care Plan	(EHCP			T
				Yes	No
ELDER BROTHER O	R SISTER DETAILS (where appli	cable)			
	· · · · · · · · · · · · · · · · · · ·	, 			
Name of elder brother or sister		Date of Birth			
	d and understand the admissions criteria fo				to
If there are any personal ci	rcumstances relating to your preference the e to contact you.	at you are not happy to disc	lose on this form	, please	tick
DETAILS OF PERSO	N COMPLETING THIS FORM				
Surname:	Please in	dicate title Mr / Mrs / Miss /	Ms		
First Name:					
Relationship to Child:					
Contact Number:					
Email Address:					