



Knowsley Council

**For school use only**

Term Autumn / Spring / Summer	Year			
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# Admission to Nursery Class in Knowsley Schools

Please read the accompanying information before completing this form. Please write clearly in black ink.

## Section 1 - Child's details

First name(s) \_\_\_\_\_ Middle name(s) \_\_\_\_\_ Surname \_\_\_\_\_

Legal Surname (if different from above) \_\_\_\_\_ Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_  Male  Female (please tick)

Child's home address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

Does the child have a final EHCP plan?  Yes  No (please tick)

Is the child looked after (in the care of a Local Authority)?  Yes  No (please tick)

If **yes**, which Local Authority? \_\_\_\_\_

Name of social worker \_\_\_\_\_ Contact number \_\_\_\_\_

Was the child previously looked after (or in state care outside of England)?  Yes  No (please tick)

If **yes**, you will need to provide evidence to support this.  
Evidence enclosed is a copy of:

Adoption Order  Residence Order  Special Guardianship Order

Do you want this application to be considered under the exceptional medical/welfare criteria? (If the admission policy of the school allows for this)  Yes  No (please tick)

**If yes - Please supply relevant professional evidence with your application - the evidence must be directly relevant to admission to the school concerned.**

Is the parent/carer a member of UK service personnel or a crown servant returning/moving to the above address to take up a posting?  Yes  No (please tick)

**If yes - Please provide a copy of an official letter showing relocation date and unit postal address or quartering area address.**

## Section 2 - Parent/Carer's details

Mr/Miss/Mrs/Ms First name(s) \_\_\_\_\_ Surname \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

\_\_\_\_\_

Tel no. \_\_\_\_\_ Post code \_\_\_\_\_

Relationship to child \_\_\_\_\_ (e.g. mother/foster carer)

**Section 3 - School nursery class preference**

**I am seeking a place in the nursery class of the following Knowsley school:**

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Please give details of any older brother/sister already attending this school/nursery class and who live at the same home address:

Name	Date of Birth
_____	_____
_____	_____

Further details:  
If you wish to provide reasons for applying you can do so. You can attach additional pages to this form if required.

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**Section 4 - Parent/carer declaration**

I have parental responsibility for the child named. I have read the information in the Knowsley School Nursery Admissions leaflet (including the privacy notice). I confirm that all the information I have given is accurate and I will inform the school immediately of any change of circumstances affecting my application (e.g. change of address). I am aware that any school place offered on the basis of false information may be withdrawn.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**Please Note: Attending the nursery class does not guarantee a place in the reception class of that school. You need to apply for a reception class place at the appropriate time and check the admission policy for the relevant year - policies can change from year to year.**

**Closing dates for applications to community and controlled schools (and participating academies):**

Date of admission to nursery	Closing Date
Autumn term (September - December)	10 March (preceeding entry)
Spring term (January - March)	Last Friday before Autumn half term (October preceeding entry)
Summer term (April - July)	Last Friday before Spring half term (February preceeding entry)

**NB - If there are fewer applicants than places, all will normally be admitted. If there are more applicants than places, the relevant admission policy will be applied.**

**This form should be returned directly to the school named as preference**

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Date received by school: (school stamp)		Address checked and confirmed <input type="checkbox"/> Yes <input type="checkbox"/> No Date of birth checked and confirmed <input type="checkbox"/> Yes <input type="checkbox"/> No
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