St Merryn School Admission Application Form for 3-4 year olds

Please be aware that if your child gets a place in our Early Years Unit they are NOT guaranteed a place in reception, even if you live within the catchment area. This is a separate admission process completed through the Local Authority (see our school admissions policy on our website).

PLEASE PRINT IN BLOCK CAPITALS AND CIRCLE WHERE APPROPRIATE

| Surname of child | | | First name of child | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------|------------------------|------------|-------|------------|----------------------------|
| Preferred name | | | | | | | |
| Date of Birth | | | Gender | Male | | Female | |
| Full name of | | | 1 | • | | | |
| parents/carers | | | | | | | |
| Address of child | | | | | | | |
| | | | | | | | |
| Postcode | | | | | | | |
| Parent's email | | | | • | | | |
| Home telephone number | | | Mobile | | | | |
| Ethnic origin | | Is your child in ca | re (looked after | Yes | | No | |
| | | by the local author | ority)? | | | | |
| | | | | | | | |
| Religion | | Does your child have a medical | | Yes | | No | |
| | | need or dietary re | equirement? | | | | |
| | | | | | | | |
| Home language | | Does your child have a statement of special/additional need? | | Yes | | No | |
| | | | | | | | |
| Additional information | on special/additiona | I/medical needs? | | • | | | |
| | | | | | | | |
| | | | | | | | |
| Please indicate what sessions you require and circle any sessions that you intend to use your 15 hour government funding for. Any sessions not circled will be charged (see session charges). | | | | | | | |
| | 1 | 1 | 1 | ssion char | | | 1.6 |
| | Breakfast club 8-9 am £4 | Morning session | | Lunchtime | | noon ce | After school |
| | 8-9 am £4 | 9-12 pm £12 | 12-1 pm £4 | | 1-3 p | m £8 | 3-6 pm £12 or £4 per hr |
| | | | | | | | (please specify |
| | | | | | | | what you require) |
| Monday | | | | | | | require) |
| Tuesday | | | | | | | |
| Wednesday | | | | | | | |
| Thursday | | | | | | | |
| Friday | | | | | | | |
| Do you wish your 15 | Yes | No | Name of set | _ | | | • |
| hours to be split with | | | hours you w | ish to | | | |
| another setting | | | attend | | | | |
| (limited to one other | | | | | | | |
| setting) | | 1 | | | | | |