

NURSERY APPLICATION FORM

Before completing this form, please carefully consider the information (including the application deadline) contained in the Nursery Entry Arrangements (published on the School's website and in hard copy form from the Primary Reception Area on request). Please note that only one parent must complete this form, giving only their own details.

Once completed, this form and any supporting documentation must be sent **by the application deadline** to:

Bridge Learning Campus, William Jessop Way, Bristol, BS13 ORL or join@blc.school

Part A - Child's details:			
Child's full legal name:			
Child's date of birth:			
Child's home address:			
(as defined in the Nursery Entry Arrangements)			
Part B - Parent's details:			
Parent's full name:			
Parent's address:			
(if different to the child's home address)			
Parent's email address:			
Parent's contact number:			



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Part C - Looked after/previously looked after children:					
Is the child a looked after or previously loo Entry Arrangements?	Yes				
(Please refer to the Nursery Entry Arrangen supporting evidence/information that must form)	No				
Part D - Children with a sibling at Bridge Learning Nursery or Bridge Learning Campus:					
Does the child have a sibling at Bridge Lear 10 at Bridge Learning Campus at the time of Year to Year 11 at Bridge Learning Campus	Yes				
attending the Nursery? (Please refer to the Nursery Entry Arrangen answering)	No				
If the answer to the above question is 'Yes', please provide full details of one sibling only below:					
Sibling's full legal name:					
Sibling's date of birth:					
Sibling's school:					
Part E - Children with a sibling at New Fosseway School:					
Does the child have a sibling who is Recep School at the time of application, who will applicant child starts attending the Nurser	Yes				
(Please refer to the Nursery Entry Arrangen answering)	No				
If the answer to the above question is 'Yes', please provide full details of one sibling only below:					
Sibling's full legal name:					



				Trust in Success			
Sibling's date of birth:							
Sibling's school:							
Part F - Type of place and order of preference							
Please refer to the Nursery Entry Arrangements for full definitions on the types of places, session times, and how places are allocated. Parents should note that there is no advantage to be gained from only expressing a preference for one type of place, or in respect of the order of preference, as applicants will be							
ranked and places allocate	ed by reference t	o the overs	ubscription criteria.				
Please place an "X" in the appropriate box	Full-time place	*	Part-Time place (Monday to Friday mornings)	Part-Time Place (Monday to Friday afternoons)			
First Preference							
Second Preference							
Third Preference							
*Applications that include a preference for a full-time place must provide their code demonstrating eligibility for 30 hours of state-funded nursery provision in the box below together with your National Insurance Number. Further information about the eligibility criteria can be found here .							
30 Hour Eligibility Code		NI Number					
Part G - Declaration:							
I certify that the information that I have provided in this form is true and accurate, to the best of my knowledge and belief:							
Signed:							
Full legal name:							
Dated:							