

NURSERY ADMISSIONS APPLICATION FORM for Bridge Learning Campus

Before completing this form, please carefully consider the information contained in the School's Admission Policy (published on the School's website and in hard copy form from the School's main office 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 to:

Bridge Learning Campus, William Jessop Way, Bristol, BS13 0RL or join@blc.school

1. Child's Details: use block capitals

Child's full legal name:	
Child's date of birth:	
Child's home address: <i>(as defined in the Admission Policy)</i>	
Current year group:	

2. Parent/Carer Details:

Parent's full name:	
Parent's address: <i>(if different to the child's home address)</i>	
Parent's email:	
Parent's contact number:	

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3. Looked after/previously looked after children

Is the child a looked after or previously looked after child as defined in the Admission Policy? <i>(Please refer to the Admission Policy for the definition and details of any supporting evidence/information that must be submitted in addition to the application form)</i>	Yes	
	No	

4. Children with a sibling at Bridge Learning Campus at the time of admissions

Does the child have a sibling at Bridge Learning Campus who is in Reception Year to Year 11 at the time of application child's admission? <i>(Please refer to the Admission Policy for the definition of a 'sibling' before answering)</i>	Yes	
	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:		

5. Children with a sibling at New Fosseway School at the time of admissions

Does the child have a sibling at New Fosseway School who is in Reception Year to Year 11 at the time of the applicant child's admission? <i>(Please refer to the Admission Policy for the definition of a 'sibling' before answering)</i>	Yes	
	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:		

6. 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 not 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 allocated by reference to the oversubscription 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 on Gov.uk website https://www.gov.uk/free-childcare-if-working.			
30 Hour Eligibility Code		NI Number	

7. Parental 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:	
Signature:	
Full legal name:	
Date:	