

# Thomas Jones School

## Nursery Application Form

Please note that this application form is for parents/carers of children who wish to join the Thomas Jones Nursery class in September 2026.

**All children must be 3 years old by 1<sup>st</sup> September 2026.**

<b>Office use only:</b>			
<b>All</b>		<b>If applicable</b>	
Admissions rank:		Eligibility checked:	
Funding option:		Date offer made:	
		Voucher code received:	
		Deposit received:	

Please complete the form in BLOCK CAPITALS using black ink.

<b>Child's surname*</b>			
<b>Child's first name*</b>			
<b>Child's date of birth*</b>		<b>Gender</b>	<b>Male/Female</b>
<b>Name of parent/carer*</b>			
<b>Permanent address the child is living at*</b>			
<b>Postcode*</b>			
<b>Home telephone number</b>			
<b>Mobile telephone number</b> (at least one number must be supplied)			
<b>Email address</b>			
<b>Does the child have a sibling at Thomas Jones school? (please tick)</b>	<b>Yes</b>	<b>No</b>	

*Please turn over*

If yes, please name all siblings and complete their current class/year group	Sibling Name		Year Group
<b>Please refer to the Nursery Parent Handbook for this next question.</b>			
<b>Which Nursery funding category do you think you will qualify for? Please tick.</b>			
Option A			Option B
A1	A2	A3	
<b>Please note that if you are applying for an Option A place, you will need to provide evidence of your financial situation if you reach the offer stage.</b>			
<b>*Does your child have any additional needs?</b>  <b><u>Please submit any additional paperwork linked to your child's additional need as part of your application.</u></b>	<b>Yes (please give details)</b>		<b>No</b>
	<input type="checkbox"/> Medical Needs <input type="checkbox"/> ASD <input type="checkbox"/> Toileting issues <input type="checkbox"/> Speech delay/ Speech & Language Therapy <input type="checkbox"/> Developmental delay <input type="checkbox"/> Behavioural/ emotional difficulties <input type="checkbox"/> EHCP <input type="checkbox"/> Other (please specify)  Please give further details:		
<b>Please sign to confirm that you wish to be considered for a place:</b>			
<b>Date:</b>			

\*Indicates fields that are compulsory to complete. If a parent/carer fails to complete these fields they may jeopardise the chance of their child being offered a place in the nursery class.

**If your financial circumstances change in any way that will affect the funding option indicated, it is essential that you contact the school immediately to inform them of this change.**

It is essential that we have accurate information on your application form. Failure to provide this may result in your child not being offered a place.

#### **Use of Data**

All personal information is handled in line with Data Protection principles. A full copy of our Data Protection and Freedom of Information Policy is available on the school's website.