



Nursery Application Form

Personal Information

First Name:

Middle Name(s):

Surname:

Date of Birth:

Gender:

Home Address:

Postcode:

Family Information

	Parent 1		Parent 2
Name:	<input type="text"/>	Name:	<input type="text"/>
Relation:	<input type="text"/>	Relation:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
Postcode:	<input type="text"/>	Postcode:	<input type="text"/>
Tel. No:	<input type="text"/>	Tel. No:	<input type="text"/>
Email:	<input type="text"/>	Email:	<input type="text"/>

Siblings

Name	Age	Education/Care Setting

Previous Childcare Experience

Has your child had previous experience in a nursery or any other care setting?

Yes

No

If yes, please provide details (including nursery name):

Attendance Information

Intended Start Date:

	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
Full Day (8.00am – 6.00pm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morning Session (8.00am - 1.00pm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon Session (1.00pm – 6.00pm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mini Day (9.00am – 3.00pm) <i>(funded place only – subject to availability)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance Pattern:	All Year Round <input type="checkbox"/>	Term-Time Only <input type="checkbox"/>			
Funding Eligibility:	Eligible Two <input type="checkbox"/>	1140 (3yrs+) <input type="checkbox"/>	College/Uni <input type="checkbox"/>		

If you are unsure about your child's eligibility for funding, please discuss this with the nursery manager, who will be happy to support you with this.

Additional Information To Support Application

Parent Signature:

Date:

Please return this form to:
Rainbow Nursery, Fullerton Street, Paisley, PA3 2NN.
Tel No. - 0141 840 4080
Email – rainbow@childcarefirst.com



**Notes for Parents/Guardians on Completing Application Form for a Placement
in an Early Learning and Childcare Setting
(Local Authority and Approved Funded Providers Including Childminders)**

1. Making Application

Please note only one application is required. Please indicate your first, second and third choices of early learning and childcare settings which **may include local authority and/or funded providers including childminders**. All applications are presented to an admission panel for allocation. The panel consists of heads of settings and representatives from other agencies. **The panel will try to accommodate your first preference, however, please note there may be occasions when the head of another setting will contact you to offer you a place if no place is available at your preferred early learning and childcare setting.** The number of preferences given on the application form does not affect the allocation process.

All information given by you will be treated in confidence.

2. Placement Requested

We will do our best to accommodate your placement needs however it is not always possible. It is helpful to know your preference, for example, specific days, times, term time or full year. Placements will be allocated in line with Renfrewshire Council's early learning and childcare admissions policy.

3. Child's Address

This should be the address of the legal guardian. Only one address is acceptable.

Proof of residence will be asked for.

4. Parents/Guardians Names

For this application form we only require the names of the child's legal guardian/s.

5. Confirmation of the Child's Date of Birth

Confirmation of the child's date of birth is required when applying for an early learning and childcare placement. The child's original birth certificate should be used. Photocopies are not acceptable.

6. Confirmation of Benefits

Proof of benefit/credit **is** required in the form of written confirmation from the benefits office/HM Revenue and Customs.

7. Deciding on Priorities

Where there is a shortage of provision, difficult choices must be made. Renfrewshire Council has agreed that there are some family circumstances which will give priority for admission. There are occasions when your child may be allocated a place at another setting. Priorities for admission are outlined in the parents' leaflet on early learning and childcare admission which is available with your application form. Please give all relevant information that could affect your application. If your circumstances change while your child's name is on the register of applicants or once they have been allocated a place, please contact the early learning and childcare setting.

8. Early learning and Childcare Designated Panel Areas / School Catchment Area

Please note the early learning and childcare designated panel area is different from the school catchment area is. Further information on School Admissions and Placing Request policy are available at www.renfrewshire.gov.uk/Apply-for-a-place-at-school

Renfrewshire Council - Children's Services

Receipt of an application form to:

Name of setting: _____

This is to acknowledge receipt of an application from:

Parent: _____

Child: _____

Address: _____

Head of Setting: _____

(signature)

Renfrewshire Council: Children's Services
Application Form for a Place in an Early Learning and Childcare Setting
(Local Authority and Approved Funded Providers Including Childminders)

To be completed by the setting:

		Confirmation of benefit/credit/education status	<input type="text"/>
Application received	<input type="text"/>	School year	<input type="text"/>
		Panel date	<input type="text"/>
Birth certificate or passport number	<input type="text"/>	Request for assistance requested	<input type="text"/>
		Proposed priority	<input type="text"/>
Proof of address	<input type="text"/>	SIMD Priority area	<input type="text"/>
		Confirmed priority	<input type="text"/>
Sessions offered	<input type="text"/>	Split place	<input type="text"/>
		Entry date	<input type="text"/>

SETTING PREFERENCE

Please identify your choice/s of early learning and childcare setting (**Local authority and approved funded providers including childminders**) in order of preference 1st, 2nd, 3rd.

Please note only one application is required. However, if you make application to any other setting your most recent application will be deemed as your preferred choice.

We will try to accommodate your preferences, but this is not always possible, and you may be offered an alternative setting or sessions.

1st setting name

2nd setting name

3rd setting name

PERSONAL DETAILS

Full Name of Child:	<input type="text"/>			
Date of Birth:	<input type="text"/>	Male	<input type="text"/>	Female
Address	<input type="text"/>			
Post Code:	<input type="text"/>			
Contact Telephone Numbers:	<input type="text"/>			

PLACEMENT PREFERENCE

Please indicate your preferred patterns of attendance. You must make at least **two choices** in the relevant boxes below. Please note, we aim to ensure preferred choices are allocated however there is no guarantee of this. **It may be helpful to speak to the Setting Head to clarify the options available.**

Early Learning and Childcare – Term Time Placement	
School Day Model e.g. Monday – Friday 9am-3pm (6 hours per day during term time)	Please state 1, 2 or 3 to indicate order of preference

Early Learning and Childcare – All Year Round/Extended Day Placement										
e.g., Morning/afternoon session between 8am-1pm/1pm-6pm for 48 weeks. 2.5 days placement for 48 weeks; extended day placement up to 10 hours.	Please state 1, 2 or 3 to indicate order of preference									
Please state your preferred specific times in the table below:										
	Monday	Tuesday	Wednesday	Thursday	Friday					
	Start	End	Start	End	Start	End	Start	End	Start	End
AM (Hours)										
PM (Hours)										
Full Day (Hours)										

Early Learning and Childcare – Blended Model			
Please indicate if you wish to use more than one setting (e.g. local authority, funded provider or childminder) to access your child’s early learning and childcare entitlement. Please specify the providers:	Please state 1, 2 or 3 to indicate order of preference		
Setting Name		Setting Name	

Wraparound Hours (Renfrewshire Council Only)										
Optional Additional Hours – in addition to the entitled hours of early learning and childcare.										
Please specify your preferred specific times in the table below.										
(Please note that this will incur wraparound charges)										
	Monday		Tuesday		Wednesday		Thursday		Friday	
	Start	End	Start	End	Start	End	Start	End	Start	End
AM (Hours)										
PM (Hours)										
Full Day (Hours)										
Term Time:					Full Year:					

Parents/Guardian

1st Contact		2nd Contact	
Address		Address	
Times of Work		Times of Work	
Daytime tel.		Daytime tel.	
Mobile tel.		Mobile tel.	
E-mail		E-mail	

ADDITIONAL INFORMATION

Please tick if in receipt of:

Job Seekers Allowance (income based)	<input type="checkbox"/>	Child Tax Credit but not working tax credit and an income within the threshold as outlined; www.mygov.scot/childcare-costs-help/funded-early-learning-and-childcare	<input type="checkbox"/>	Child Tax Credit & Working Tax Credit and an income within the threshold as outlined; www.mygov.scot/childcare-costs-help/funded-early-learning-and-childcare	<input type="checkbox"/>
Any income related element of Employment and Support Allowance	<input type="checkbox"/>	Support Under Part VI of the Immigration and Asylum Act 1999	<input type="checkbox"/>	Universal Credit and your take home pay is within threshold as outlined www.mygov.scot/childcare-costs-help/funded-early-learning-and-childcare	<input type="checkbox"/>
Income Support	<input type="checkbox"/>	State Pension Credit	<input type="checkbox"/>	Incapacity or Severe Disablement Allowance	<input type="checkbox"/>

Please tick if applicable:

Parent under 18 in full time education	<input type="checkbox"/>	Asylum Seeker	<input type="checkbox"/>	If your child is 2 or over and is or, since they turned 2, has been looked after by the local council.	<input type="checkbox"/>
Premature Baby Below 32 weeks	<input type="checkbox"/>	Refugee	<input type="checkbox"/>	If your child is 2 or over and is or, since they turned 2, has been the subject of a kinship or guardianship order	<input type="checkbox"/>
Premature Baby 33-36 weeks	<input type="checkbox"/>	No permanent address	<input type="checkbox"/>	Your child who is 2 or over has a care experienced parent.	<input type="checkbox"/>
Military family	<input type="checkbox"/>		<input type="checkbox"/>	In receipt of benefit in line with Renfrewshire council free school meal and/ or clothing grant www.renfrewshire.gov.uk/article/3338/Free-school-meals-and-clothing-grants	<input type="checkbox"/>

Names and ages of other children in family (please list)

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Please state professional agencies involved with your family.

<u>GP</u>		<u>Health Visitor</u>	
Contact Person:		Contact Person:	
Address:		Address:	
Telephone No.		Telephone No.	

Please tick appropriate box:

	Yes	No
Does your child have any long-term illness, medical condition or disability?		
If yes, has there been a professional assessment identifying a disability?		
If yes, can you provide copies of professional assessment?		

Additional information in support of the application

	Yes	No
Do you feel your child needs a priority place? (Please refer to the parent's leaflet on admissions)		
If yes, please state the reason(s) for priority place. You can also discuss your reasons with the Head of Setting who will be happy to assist you.		

Equality Information

We would like you to help us collect information about your language, religion, ethnic background and national identity. You are not required to answer the following questions; however the information is extremely valuable as it is used to monitor the effectiveness of the council and helps us to plan services.

Ethnic background	
What language(s) does your child speak?	
National Identity	
Religion	

Declaration of Parent/Guardian

I declare that the above is a statement of my circumstances. If required I give permission for the person(s) named above to be contacted about this application.

I also understand that the early learning and childcare designated panel area is different from the school catchment area.

Data Protection: The information provided by you will be used for the purpose of planning Early Learning and Childcare provision and for the purposes of the Council's public functions. The Council may check your details with other information held and may share the information with other Council Services and other local authorities' agencies and organisations to check the accuracy of the information and to prevent and detect fraud or crime or to protect public funds.

Further information on how the Council handles your personal information can be found on www.renfrewshire.gov.uk/article/2201/privacy-policy

If your child currently attends a nursery outside the Renfrewshire Council area, we would also seek access to the education records for your child from that education authority. By signing the form below, you consent to Renfrewshire Council Children's Services receiving a copy and access to your child's current educational record held by that education authority.

If you require further information on how the Council will process your application, information on schools or help with completion of this application form please contact: 0300 300 0160. Frequently asked questions can also be found at www.renfrewshire.gov.uk

Signature of Parent/Guardian:	
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Date:	
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