Fordley Primary School

Dudley Drive

Dudley

Northumberland

NE23 7AL

Phone: 0191 2502207

Email: office@fordleyprimary.org.uk

Website: [www.fordleyschool.com](http://www.fordleyschool.com)

Twitter: @FordleyPrimary Headteacher: Mrs C.L. Withers (BA QTS Hons, NPQ)

**APPLICATION FOR NURSERY PLACE**

|  |  |
| --- | --- |
| CHILD’S **LEGAL** SURNAME |  |
| CHILD’S **CHOSEN** SURNAME |  |
| CHILD’S FIRST NAME |  |
| CHILD’S MIDDLE NAME(S) |  |
| Male/Female(please circle) | Date of Birth | Are you eligible for the30 hour offer? (please tick) Yes No |
| Address of Child:  | Full Name and Address of Parent/Carer (1) |
|  | Name:  |
|  | Address: |
|  |  |
|  |  Post Code: |
|  | Mobile Telephone No. |
| Post Code: | Full Name and Address of Parent/Carer (2) |
| Home Telephone No. | Name: |
| Email: | Address: |
|  |  |
| If there is a choice, would you prefer a morning or afternoon place? (please tick) AM PM |  Post Code: |
| Mobile Telephone No. |
| Ethnicity (e.g Whte/British) |  | First Language(e.g English, Chinese) |  |
| Religion (please state none, if none) |  | Travel Arrangements(e.g walk, car, bus) |  |
| Names of brothers and/or sisters | Date of Birth | Current School Attending |
|  |  |  |
|  |  |  |
|  |  |  |
| Name of Health Visitor: |
| Name of Family Doctor: |
| Address: |
|  Telephone No. |
| Any medical information (e.g allergies, medical conditions) |
|  |
|  |
| Signature of Parent/Carer Date: |
| **(OFFICE USE ONLY)**Birth certificate seen? Yes No Signature: Date received: |