**ADMISSION FORM - NURSERY**

Sky Primary and Eden Project Nursery

Cherry Zone

Eden Project

Carne Cross

St Blazey

Par

PL24 2S

Telephone: 01726 438609
Email: sky@kernowlearning.co.uk

Web: sky.kernowlearning.co.uk

CONFIDENTIALITY: The information given below will be maintained on the school’s database to which no unauthorised person shall have access and will be subject to strict control under the Data Protection Act

(Please Note: This application form does not constitute an offer of admission)

**NAME OF PARENT/S** ………………………………………………………………………………………………………………….

(full individual details to be included in the contact are of Section C)

Please ensure you give details of any previous schools including Nursery, Pre-Schools, Overseas or Private Education

Name & Address of Previous School or Setting ………………………………………………………………………………………………………………………

 ……………………………………………………………………………………………………………………….

Telephone ……………………………………………………………………. Dates Attended ……………………………………………………………………………..

Section B – **Pupil School History**

Legal Forename ………………………………………………………………. Legal Surname …………………………………………………………..

Middle Name(s) ………………………………………………………………. Preferred Surname ……………………………………………………

Preferred Forename ……………………………………………………….. Date of Birth ……………………………………………………………..

Age at Admission ……………………………………………………………. Gender: *Male/Female*

Previous Surname …………………………………………………………...

**Pupil Address:**

Postcode ……………………………………………………………………….. House Number/Name ………………………………………………..

Street …………………………………………………………………………….. Town/City ………………………………………………………………….

Section A – **Basic Pupil Details**

***Contact 3***

Title …………… Forename ……………………………………………. Surname …………………………………………………………..

Postcode …………………………………… House Number/Name ………………………………………………………………………

Street ………………………………………………………………….. Town/City ………………………………………………………………

 Parental Responsibility  Court Order

Relationship to child:  Mother  Father  Step Parent  Foster Parent  Grandparent

  Other Relative  Neighbour  Guardian  Social Worker

Mobile ……………………………………………………… Landline ……………………………………………………………..

Work ……………………………………………………….. Other ………………………………………………………………….

***Contact 2***

Title …………… Forename ……………………………………………. Surname …………………………………………………………..

Postcode …………………………………… House Number/Name ………………………………………………………………………

Street ………………………………………………………………….. Town/City ………………………………………………………………

 Parental Responsibility  Court Order

Relationship to child:  Mother  Father  Step Parent  Foster Parent  Grandparent

  Other Relative  Neighbour  Guardian  Social Worker

Mobile ……………………………………………………… Landline ……………………………………………………………..

Work ……………………………………………………….. Other ………………………………………………………………….

***Contact 1***

Title …………… Forename ……………………………………………. Surname …………………………………………………………..

Postcode …………………………………… House Number/Name ………………………………………………………………………

Street ………………………………………………………………….. Town/City ………………………………………………………………

 Parental Responsibility  Court Order

Relationship to child:  Mother  Father  Step Parent  Foster Parent  Grandparent

  Other Relative  Neighbour  Guardian  Social Worker

Mobile ……………………………………………………… Landline ……………………………………………………………..

Work ……………………………………………………….. Email ………………………………………………………………….

Section C – **Emergency Contacts**

Section E – **Pupil Ethnic/Cultural Information:**

*The school is required by law to provide the information you give in this section to the DfE. The school will not use this information for any other purposes.*

Ethnicity:

 White – Cornish  Other White British  White – Irish

 Traveller of Irish Heritage  Gypsy/Roma  Any other white background

 White & Black Caribbean  White & Black African  White & Asian

 Any other mixed background  Indian  Pakistani

 Bangladeshi  Any other Asian background  Black Caribbean

 Black – African  Any other Black background  Chinese

 Any other Ethnic Group  Refused  Info net yet obtained

First Language: ENGLISH  or OTHER (please specify) ……………………………………………………………………………………….

Asylum Seeker  Refugee Status  Traveller Status 

Religion:

 Anglican  Buddhist  Christian

 Hindu  Jewish  Methodist

 Muslim  No Religion  Other Religion

 Roman Catholic  Sikh

Home Language: ………………………………………………………………………………….

Country of Birth: ………………………………………………………………………………....

National Identity:  Welsh  English  Scottish  Cornish

  Irish  British  Other…………………………….

Emergency Medical Consent  (this confirms your agreement for the school to initiate appropriate medical treatment in the

 event of an emergency)

Medical Practice: .………………………………………………………………………….

Practice Address: …………………………………………………………………………..

 …………………………………………………………………………..

Telephone: …………………………………………………………………………..

Doctor’s Name: …………………………………………………………………………..

**Medical Conditions/Information:** please inc. details of any allergies/medical conditions e.g. asthma, and medications

 regularly taken. (if you require more space please give full details on a separate

 sheet**). If none, please state NONE**

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Section D – **Pupil Medical Information:**

I confirm that all the information provided is true and accurate. I undertake to inform the school if any of the above details change. I understand that this form does not constitute an offer of admission by the school.

Print Name: …………………………………………………………………………..

Relationship to Child: …………………………………………………………………………..

Signed: ………………………………………………………………………….

Date: ………………………………………………………………………….

Section H – **Declaration:**

If the pupil is subject to any Court Orders please specify the Court Order terms below. This information is CONFIDENTIAL but will help the school understand the pupil’s position. A copy of any Court Orders will need to be provided to the School Office as soon as possible:

……………………………………………………………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………………………..

Section G – **Court Orders:**

Meals:

* Free Meal  Home  Packed Lunch  School Meal

Mode of Transport:

* Cycle  Car  Walk  Public Transport  School Bus
* Taxi  Car Share

Child of Service Personnel:

*(Parent serving in Royal Navy, Army or RAF)*

  Yes  No

Section F – **Pupil Additional Information:**