



St Robert Southwell Catholic Primary School

Slough Lane, Kingsbury, London NW9 8YD

Nursery Application Form 2024/25

Child's Details

Child's First Name:	
Child's Surname:	
Child's Date of Birth: (copy of birth certificate req'd)	
Address:	
Postcode:	

Parent/Carer Details

Parent(s)/Carer(s) names:	
Address:	
Telephone Number:	
Email Address:	

Details of Religion

Religion of child: (Please tick)	Catholic	Other Christian	Other faith
Catholic Parish you live in:			
Church where child was baptised and date of baptism: (copy baptism certificate required)			

Name/DOB of Siblings

Name	Date of Birth	Current School (if applicable)

Hours Requested: (please tick)

Full Time (8.15 am – 3.30 pm)		30 hours (plus paid supplement for lunch time supervision)
Mornings only (8.30 am – 11.30 am)		

Does your child have exceptional medical, pastoral or social needs that can only be met by attendance at this school? Please circle. (Professional evidence will be required.)	
YES	NO

I confirm that the information I have provided is correct. I understand that I must notify the school immediately if there is any change to these details and that should any information I have given prove to be inaccurate that the Governors may withdraw any offer of a place even if the child has already started nursery.

I UNDERSTAND THAT COMPLETION OF THIS FORM DOES NOT GUARANTEE A PLACE AT THE NURSERY AND, FURTHERMORE, AN ALLOCATION OF A NURSERY PLACE DOES NOT GUARANTEE A SCHOOL PLACE.

Signed..... Date.....

Checklist:

- Have you enclosed?
- Copy of Birth Certificate
- Copy of Baptism Certificate (if applicable)
- Evidence from a Professional of Exceptional need (if applicable)