



Church Road, Earley, Reading RG6 1EY Tel: 0118 9261657

Email: admissions@earley-st-peters.wokingham.sch.uk

## APPLICATION FOR ADMISSION 2024 - 2025

DETAILS OF CHILD:						
Surname:			Forenames:			
Date of	Birth:					
Gender: Male Female						
Address:						
	Postcode:					
NAME OF PARENT/CARER:						
Title	Forename	Surname	Relationship to child	Daytime Tel. No.		
Contact No:						
E:mail:						

## **ADMISSION CRITERIA**

Please tick the box that	is relevant to your application.			
I am applying for my ch Category of the Admiss	ild to be admitted to Earley St. Peter's Nursery under the following ions Policy:			
	tion Health and Care Plan (EHCP) or a Statement of Special ing Earley St. Peter's Nursery			
Category One:	Looked-after children and children who were previously looked after, but ceased to be so because, immediately after being looked after they became subject to an adoption, child arrangements or special guardianship order.			
Category Two:	Residence in a road listed in the Policy			
Category Three:	Children living in the Wokingham Borough Council part of Earley (these are roads in the administrative area of Earley as listed by Earley Town Council), but not in one of the roads listed in the Admissions Policy. (Children living in the Reading Borough Council Part of Earley are not included in this category). Classification can be sought by viewing the Earley Town Guide published by Earley Town Council.			
Category Four:	Other reason ( <i>Please state reason</i> )			
Please state whether a	pplication is for 15 hours per week or 30 hours per week			
PLEASE NOTE:				
<ul> <li>If applying for 15 hours per week we cannot guarantee which session is offered. However, if you have a preference for either a morning or afternoon place, please set out the reasons in a separate letter and attach the letter to this form.</li> <li>Children who gain a place at the Nursery will NOT automatically gain a place at Earley St. Peter's C.E. Primary school.</li> <li>The right is reserved to verify any of the information given on this form and to the entitlement to the number of free hours applied for.</li> </ul>				
•	t. Peter's Nursery Admissions Policy. I confirm that the information I d that my child is entitled to free childcare in respect of the hours for			

Please return this form to Earley St. Peter's school office or email <a href="mailto:admissions@earley-st-peters.wokingham.sch.uk">admissions@earley-st-peters.wokingham.sch.uk</a> Thank you.

Signed: .....(Parent/Carer) Date: .....