



St Augustine's Catholic Primary School

Head Teacher: Mrs J Foley



We love and learn together by growing
in friendship with Jesus

Application for a Nursery Place September 2024

Child's details			
Surname			
Forename		Gender	
Middle name		Date of birth	
Current childcare			

Home address			
Flat no / building name			
Number / street			
District			
Town		Post code	

Contact details for parent/carer			
Title: Mr/Mrs/Miss/Ms		Phone (day)	
Surname		Phone (evening)	
Forename		Phone (mobile)	
Email address			
Relationship to child		Do you have parental responsibility?	Yes / No

Brothers or sisters who will be attending St Augustine's School at the same time			
Name:		DOB:	
Name:		DOB:	
Name:		DOB:	

Faith - Please enclose a copy of your child's Baptism certificate and Supplementary Information Form (SIF)			
Is your child a baptised Catholic?	Yes / No	Other faith please specify	
Place of baptism		Baptism date	Certificate attached <input type="checkbox"/> SIF attached <input type="checkbox"/>

Additional information about your child	
Does your child have an Education, Health and Care Plan (EHCP)?	Yes / No
Is your child "looked after" by a local authority (in care)?	Yes / No
Are you taking up part of your provision with another provider? If yes, please give details	Yes / No

If you have been offered provision elsewhere be sure to let everyone know where your child is going to attend.

Please return this application form to the address below ensuring your child's Baptism Certificate and SIF form are included, in order for your child to be ranked correctly against the Admissions criteria.

