Bessemer Primary School Full Time Nursery Application



Part of the Gem Federation

Return form by email: office@besemergrange.southwark.sch.uk Return form by post/ in person: Dylways, London, SE5 8HP

Please note: If your child is admitted to Nursery, they will not be automatically offered a place in Reception

Child's First Name	Child's Surname	
Date of Birth	Gender	
Name of previous	Last Date of	
school if applicable	attendance	
Child's Home		
Address		
Please provide two c	ontacts the school can use to discuss this application:	
Parent/Carer First	Parent/Carer	
Name	Surname	
Contact Number		
Parent/Carer First	Parent/Carer	
Name	Surname	
Contact Number		

Please give det	ails of other children on the s	chool roll who live a	at the same address as you
Child's Name		Current Class	Relationship
Does your child	have any medical and/or so	cial reasons for mak	ing this application?
If YES please giv	e		
brief details			
Does your child	have any special educationa	ıl needs?	
If YES please giv	e		
brief details			
	Please ensure you attac	h any supporting doc	uments to this form
	PARENT DECLARATION: I c	onfirm all details o	n this form are correct
Signature			Date

Are you eligible for 30 hours free childcare?

YES 🔲

NO 🗌

Office use only

Application date:			Headteacher comments
Proof of address seen	YES	NO	
Birth cert seen	YES	NO	

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Child's Attendance Pattern

I will pay for a funded full-time place in Nursery, at £30.00 per day.

My child will attend Nursery on the below indicated sessions:

Monday	Tuesday	Wednesday	Thursday	Friday
АМ	АМ	АМ	АМ	АМ
РМ	РМ	РМ	РМ	РМ

I am eligible for 30 hours free childcare and my child will attend Nursery:

5 days a week full time (Mon-Fri)

I understand this means I will be charged £3.00 per day for lunchtime supervision

4 ½ days a week on the below indicated sessions:

Monday	Tuesday	Wednesday	Thursday	Friday
АМ	АМ	АМ	АМ	АМ
РМ	РМ	РМ	РМ	РМ

30 Hour Eligibility Confirmation

Parent's full name:	National Insurance Number:

30 Hour free childcare Eligibility code:

Please note you must provide this code before your child starts Nursery, or you will need to pay the full Nursery charge of £30.00, until the code is received by school.

Office use only

Application date:			Headteacher comments
Proof of address seen	YES	NO	
Birth cert seen	YES	NO	

Bessemer New Applicant Information Sheet *To be completed prior to enrolment*

What is the student's level of attendance at their current/most recent school?

90% or less	90-96%	96% +

What are the student's academic levels at their current/most recent school?

Reading	Below expected level	At expected level	Above expected level
Writing	Below expected level	At expected level	Above expected level
Maths	Below expected level	At expected level	Above expected level

Does the student have English as an additional language (EAL)?

Yes	Νο
If yes, are they new to English?	

Does the student have medical needs?

Yes Details:	No
Does the child have a Health Care Plan to support their medical needs?	

Does the student have special educational needs? Is the student on the SEN register? Have they previously been on the SEN register?

Yes	No

If YES, please provide the following information:

Area of special educational need:

Cognition and	Speech Language and	Social Emotional and	Sensory/Physical
Learning	Communication Needs	Mental Health Needs	Needs

Diagnosis: _____

Details of support at current/most recent school:

Has the child had any behavioural difficulties at their current/most recent school?

Yes	No
Details:	

Is the child known to any other services?

Educational Psychology	Speech and Language Therapy	CAMHS
Occupational Therapy	Early Help Service	Children's Social Care
School Nursing	Other:	Other:

Is the child on a Child Protection Plan or Child in Need Plan? Are there any safeguarding concerns for the child and family?

Yes	No

Any other information: