TWEEDDALE PRIMARY SCHOOL

high aspirations – broad horizons

Date of Day

/Month/



1 Child's Details

(please see notes in Starting Nursery booklet)

Please note that only the first contact will receive an outcome letter.

Child's

Surname



Boy/

Girl

Application for Starting Nursery in 2024/2025 Academic Year

Please only use this form if you are applying for a nursery place at Tweeddale Primary School. Completed forms must be returned to: Tweeddale Primary School Office with your child's birth certificate and proof of your address. The school office can take photocopies of your documents if you only have originals.

Name	Name(s)					
<u>.</u>						
Child's Home		icants from outside the London Borough of Sutton t provide address evidence with this application		Has the child moved in the past 12 months? Yes/No If yes, previous address:		
	Pos	stcode:	F	Postcode:		
		ress where the child normally lives. If this is differently, this must be stated and both addresses shown.		m the parent/carer address, please give reasons for this. lence of address is required.)		
2 Parent	t / (Carer's Details				
		Applicant (First Contact)		Second Contact (Optional)		
Parent/Carer T	itle	(Please circle) Mr Mrs Miss Ms Dr Other		(Please circle) Mr Mrs Miss Ms Dr Other		
Surname						
First Name						
Relationship to Child						
				1		
Address (if different from child's address above)		Postcode:		Postcode:		
		1 Ostcode.	—	i ostcode.		
Home Tel No Daytime Tel No Mobile Tel No E-mail Addres						
Do you have P	Paren	tal Responsibility for this child? Yes/No	,	Yes/No		

Nursery Preference / Sibling / Medical or Social Reasons there will be a sibling attending Tweeddale Primary School on the date of your younger child's admission please ge details below. If there is more than one sibling, please give the details of each child with your application. First Name: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Optional – Reasons for Preference Optional – Reasons why your child should attend be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	mediately following having been in Public (
there will be a sibling attending Tweeddale Primary School on the date of your younger child's admission please ge details below. If there is more than one sibling, please give the details of each child with your application. First Name: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Surname: Surname: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Optional – Reasons for Preference Inly complete this space if you think there are exceptional medical or social reasons why your child should attend contribular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Yes, please state which Local Authority	
Surname: Date of Birth: Year Group: Gender: First Name: Surname: Surname: Surname: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Date of Birth: Year Group: Gender: Optional – Reasons for Preference Thy complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for		
Surname: Date of Birth: Year Group: Gender: First Name: Surname: Surname: Surname: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Date of Birth: Year Group: Gender: Optional – Reasons for Preference Thy complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	there will be a sibling attending Tweeddale Pri	imary School on the date of your younger child's admission please g
Date of Birth: Year Group: Gender: First Name: Surname: Date of Birth: Year Group: Gender: First Name: Surname: Date of Birth: Year Group: Gender: Date of Birth: Year Group: Gender: Optional – Reasons for Preference The complete this space if you think there are exceptional medical or social reasons why your child should attend considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	First Name:	First Name:
Year Group: Gender: First Name: Surname: Date of Birth: Year Group: Gender: Optional – Reasons for Preference Inly complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Surname:	Surname:
First Name: Surname: Date of Birth: Year Group: Gender: Optional – Reasons for Preference Illy complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Date of Birth:	Date of Birth:
Surname: Date of Birth: Year Group: Gender: Optional – Reasons for Preference Inly complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Year Group: Gender:	Year Group: Gender:
Date of Birth: Year Group: Gender: Optional – Reasons for Preference Inly complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to be considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	First Name:	First Name:
Year Group: Gender: Optional – Reasons for Preference Ily complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to exconsidered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Surname:	Surname:
Optional – Reasons for Preference nly complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to e considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Date of Birth:	Date of Birth:
nly complete this space if you think there are exceptional medical or social reasons why your child should attend particular school. You must provide professionally supported evidence with this application form for your claim to considered. It is rare for a social or medical claim to be upheld. Please see the Starting Nursery booklet for	Year Group: Gender:	Year Group: Gender:
	nly complete this space if you think there are ex	xceptional medical or social reasons why your child should attend

5 Declaration and Signature of Parent/Carer

Tweeddale Primary School and Greenshaw Learning Trust are committed to protecting your privacy. We will treat any personal information by which you can be identified (i.e. name, address, e-mail etc.) in accordance with the provisions of the Data Protection Act 1998. We will not collect any personal information without your knowledge. This information will be collected for a known purpose that you understand and will not be used in future for any reason other than the one for which it is being collected. We will not sell, trade or rent your information to other third parties.

Please note:

- Tweeddale Primary School and Greenshaw Learning Trust will investigate any applications where there are any
 doubts about the information provided, where information has been received from a member of the public to suggest
 a fraudulent application has been made or where records show a change of address within the previous
 12 months.
- Applicants in short term rented accommodation may be asked to provide evidence of their current and former
 housing arrangements. Where an applicant has ownership of a property, that address should be used for the
 purposes of school admission and the applicant must provide evidence and reasons for the use of any other
 address.
- Any applicant who moves from a rented or temporary address in advance of their child taking up their school place may have their place withdrawn if it is found the family have returned to an address already in their ownership.
- The authority will investigate whether the place should be withdrawn if the pupil is not resident at the application address at the time of the September entry point.
- Tweeddale Primary School and Greenshaw Learning Trust will always investigate a case where the application address has previously been used to gain a school place fraudulently.
- Where it is found an address has been used for the purposes of admission where the child is not ordinarily
 resident, the application and any place offered will be withdrawn.
- An offer found to have been gained fraudulently will be withdrawn. This may also be the case where the child has started the school.
- In some cases, places may not be withdrawn once a child has been attending the school for a term or more. In these circumstances future sibling applications will not be given sibling priority for places and will be considered under the next appropriate criterion.

•	I certify that I am the person with Parental Responsibility for the child named on this form and that the information given is true to the best of my knowledge and belief. I understand that any false or misleading information given on this form and /or supporting information may render this application invalid, or lead to an offer of a place being withdrawn, and that it is solely my responsibility to provide full information to Tweeddale Primary School and Greenshaw Learning Trust. I will notify the school office at Tweeddale Primary School of any changes to the details on this form as soon as they occur, including any change of address, and understand that failure to do so may result in an offer being withdrawn. I authorise Tweeddale Primary School and Greenshaw Learning Trust to make checks as they deem necessary, including enquiries of other record systems held by Sutton Council.
Pa	rent / Carer's Signature: Date: