

Application Form – Our Policy

Applications to join Pre-school can be made at any time. The accompanying application form should be completed as fully as possible and returned to the Pre-school Business Manager, who will add your child to the Waiting List. We welcome children from 2 years of age, although priority is given to children nearest to school age.

Note that if space is limited, priority will be given to children within the catchment area, and a place on the Waiting List does not guarantee a place at Pre-school, although we will endeavour to offer places to as many eligible children as possible. You should be aware that eligible children closest to school age will be offered a place before younger children, regardless of time spent on the Waiting List.

We meet on Weekday mornings from 9.05 to 12.05, Mondays, Tuesdays and Fridays afternoons 12:05 to 3.05 during school term time. There is also the option to stay for an extra hour for lunch club or attend the breakfast club as long as your child has attended the morning session – further details are available on request.

Currently all children qualify for 15 free hours from the term following their third birthday, and some children qualify for an extra 15 hours if both parents are working. Some children may qualify for 15 hours free childcare from the term following their second birthday if their families are in receipt of certain benefits.

Pre-school is always pleased to claim funding for you, so ask the Pre-school Business Manager for details of how to go about it.

Where fees are due, a bill will be issued monthly. Parents are asked to pay within 4 weeks. If you have any problems with payment please speak to the Pre-school Business Manager.

For more information, please see our website: www.astonpreschoolderby.com

Please retain this half of the form for future reference, and return the completed form to Pre-school, or as directed by the website.

(Please advise if a place is no longer required so that we can update the waiting list accordingly.)

Application Form

Full name of child

Preferred name

Date of birth

Parents' /carers' names

Address

Post Code

Phone: Home

Work

Mobile

Email

Doctor: Name

Address Phone

Is your child up to date with the immunisation program? YES / NO

Has your child any medical condition, which may require treatment during pre-school? YES / NO (If yes, please give brief details overleaf)

Preferred sessions:	Mon	Tues	Weds	Thurs	Fri
Breakfast					
Morning					
Afternoon					

Preferred start date

Does your child have a sibling(s) attending Aston School/Pre-school? YES / NO

If yes, please give details

To which primary school are you intending to send your child?

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Please continue overleaf with any other information that you wish to bring to our attention.

Signature _____

Date _____