

# UPHALL NURSERY WAITING LIST



THE  
THINKING  
SCHOOLS  
FEDERATION

Please provide birth certificate, proof of address and national insurance number or NASS number.

FIRSTNAME: \_\_\_\_\_ SURNAME: \_\_\_\_\_

DOB: \_\_\_\_\_ GENDER: Male/Female

ADDRESS: \_\_\_\_\_

Siblings: YES/NO Siblings name and class: \_\_\_\_\_

SEN: YES/NO Toilet Trained: YES/NO

Ethnicity: \_\_\_\_\_ Religion: \_\_\_\_\_

Nationality: \_\_\_\_\_ Language: \_\_\_\_\_

## MUMS DETAILS

Name:

\_\_\_\_\_

Contact Number:

\_\_\_\_\_

NI or NASS number:

\_\_\_\_\_

Email Address:

\_\_\_\_\_

Address:

Same as Child: YES/NO

## DAD'S DETAILS

Name:

\_\_\_\_\_

Contact Number:

\_\_\_\_\_

NI or NASS number:

\_\_\_\_\_

Email Address:

\_\_\_\_\_

Address:

Same as Child: YES/NO

I would like a full time Nursery place {30 hours)  
back of this form)

(information on how to apply is on the

My 11 digit 30-hour code is: \_\_\_\_\_

\_\_\_\_\_

I would like a part time Nursery place {15 hours)

AM

PM

Date received: \_\_\_\_\_