



Great Gaddesden C of E (VA) Primary School
Supplementary Information Form for NURSERY :
School Year 2025/26

For entrance to the Reception class in September 2025, this form should be completed and returned to the school office, no later than 15th January, 2025.

For entrants to other year groups for occasional vacancies that may occur, this form should be completed and returned to the school office at the earliest opportunity and it should be kept up to date by letter, email or telephone at the earliest opportunity at the beginning of each successive term.

- Please indicate the criteria under which the application is being submitted.
- Please ensure supporting evidence, if appropriate, is attached to this form when submitted to the school.

Child details

Surname _____

First name(s) _____

Date of birth _____ Male or Female

Address of family home (including postcode)

Date required for admittance _____

If attending another school, including pre-school /nursery, please give details : _____

Parents/Guardian details : Surname _____

First Name: _____

Title _____

Telephone number(s) _____

Email address _____

Parents/Guardian details : Surname _____

First Name: _____

Title _____

Telephone number(s) _____

Email address _____

Criteria 1

All **'looked after'** children or children who were previously **'looked after'** but immediately after being **'looked after'** became subject to an adoption, child arrangements or special guardianship order, including those children who appear (to the admission authority) to have been in state care outside of England and ceased to be in state care as a result of being adopted.

Yes / No (*delete as applicable*)

Criteria 2

Children at the time of admission, who have a **sibling** attending Great Gaddesden Primary School.

Yes / No (*delete as applicable*)

Criteria 3

Children who **live in the Parish** of Great Gaddesden and Nettleden

a) parent(s)/guardian(s) have attended services at their parish church or place of worship at least once a month during the previous two years

Yes / No (*delete as applicable*) .

If "yes", name of church or place of worship attended:

Please note that the Governors will seek written confirmation of attendance from this church/place of worship.

Criteria 3 b)

Children who **live in the Parish** of Great Gaddesden and Nettleden

b) geographic proximity.

Children who do live in the Parish of Great Gaddesden and Nettleden, but do **not** attend services at their parish church or place of worship.

Yes / No (delete as applicable)

Criteria 4

All other children

Yes / No (delete as applicable)

Signature of Parent:

Signature _____

Print Name _____

Date _____