

APPLICATION TO PRESCHOOL

Clyst Valley Pre-School

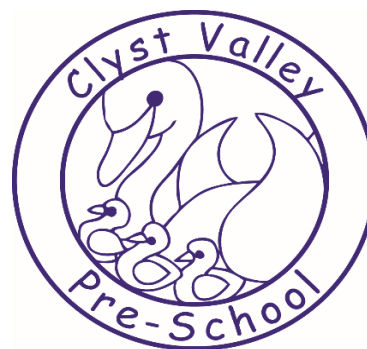
Clyst St Mary

Exeter

EX5 1BG

01392 876615

admin@clystvalleypreschool.org



Family Details

Childs name	
Name known as	
Date of birth	
Name of Parent/(s) with whom the child lives	
Does the child live here full time?	
Parent 1: name & address	
Phone Number	
Email	
Occupation	
Parent 2:name (address if different)	
Occupation	
Phone Number	
Email	
Who has parental responsibility?	
Siblings: names & ages.	

Does your child have any special needs or disabilities? If so, please specify:

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Are there any of the following in place for the child?

- SEN action plan
- Education, Health and Care Plan

What special support will your child require in our setting?

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I/We would like to apply for our child to start:	
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I/We would like to our child to attend the following session			AM session 9.15-12.15/PM session 12.15-3.15	
Monday am	Tuesday am	Wednesday am	Thursday am	Friday am
Monday pm	Tuesday pm	Wednesday pm	Thursday pm	Friday pm

If you no longer need the place, please inform Clyst Valley Preschool as soon as possible; **Should you decide you no longer require a place, we will not retain the details on this form.**
 Clyst Valley Preschool handles data in full compliance with the GDPR, for full details please see our Privacy Notice which is available on request..

Signature of parent(s)

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We will contact you to confirm your child's place once this form has been returned, and will then be in touch the term before your child is due to start preschool, with details of 'settling in sessions' etc.