

[illegible]

These details must be supplied, so we can process your application.



In order to be considered from your proposed new address, you must provide independent confirmation of it.

If you are buying a property you must provide a solicitor's letter confirming that contracts have been exchanged and a completion date set. If you will be renting, a copy of the tenancy agreement signed by both parties (landlord and tenant) is required. Your application will not be considered from the proposed new address until independent confirmation is received.

If you are not providing independent confirmation, do you want your application considered from your current address?

☐ Yes ☐ No

Is the child in care of a local authority?

☐ Yes ☐ No

Has the child previously been in the care of a local authority but has since been adopted (or become subject to a residence order or special guardianship order)?

☐ Yes ☐ No

Is the child a young carer?

☐ Yes ☐ No

If 'Yes' to any of the above questions please provide further details in the box below. Please include the names and contact details of any outside agencies currently involved with this child (Social Worker; CAMHS; Behaviour Support, Local Support Team or similar) and attach a letter of support if applicable.

Click or tap here to enter text.

You should note that if you do not disclose relevant information where applicable this will delay your application being processed and could lead to your application being invalidated.

☐ Yes ☐ No

☐ Yes ☐ No

Click or tap here to enter text.

☐ Yes ☐ No

☐ Yes ☐ No[illegible]



Is your child eligible for Free School Meals?

- ☐ Yes ☐ No

If 'Yes', please provide documentation.

How will your child travel to school?

- ☐ Walk ☐ Cycle ☐ Car ☐ Taxi
☐ Train ☐ Bus

Section 3: Your child's religion

- ☐ Christian ☐ Sikh
☐ Hindu ☐ Other
☐ Jewish ☐ No religion
☐ I do not wish a religion category to be recorded

Section 4: Your child's ethnicity

- | | |
|---|---|
| White | Mixed |
| <input type="checkbox"/> British | <input type="checkbox"/> White and Black Caribbean |
| <input type="checkbox"/> Irish | <input type="checkbox"/> White and Black African |
| <input type="checkbox"/> Traveller or Irish heritage | <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Gypsy / Roma | <input type="checkbox"/> Any other mixed background |
| Any other white background | Asian or Asian British |
| <input type="checkbox"/> Albanian | <input type="checkbox"/> Indian |
| <input type="checkbox"/> Bosnian-Herzegovinian | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Croatian | <input type="checkbox"/> Bangladeshi |
| <input type="checkbox"/> Greek / Greek Cypriot | <input type="checkbox"/> Any other Asian background |
| <input type="checkbox"/> Kosovan | Black or British |
| <input type="checkbox"/> Serbian | <input type="checkbox"/> Caribbean |
| <input type="checkbox"/> Turkish / Turkish Cypriot | <input type="checkbox"/> African |
| <input type="checkbox"/> Eastern European | <input type="checkbox"/> Any other background |
| <input type="checkbox"/> Western European | |
| <input type="checkbox"/> Any other white background | |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Any other ethnic background |
| <input type="checkbox"/> I do not wish an ethnic background category to be recorded | |

Doctor's name:

[illegible][illegible][illegible]

--	--	--	--	--	--	--	--

[illegible]

Click or tap here to enter text.

Click or tap here to enter text.

Nailsea School does not employ a trained nurse to administer medications and will not accept liability for dispensing medicines. You will be asked to sign an indemnity form.

Name and address of current school or last school attended:

[illegible]

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

Click or tap here to enter text.

N	A	I	L	S	E	A		S	C	H	O	O	L
---	---	---	---	---	---	---	--	---	---	---	---	---	---

Click or tap here to enter text.

Name of sibling:	Date of birth:	Current year group:

☐ Yes ☐ No[illegible]

☐ Mother ☐ Father ☐ Step-parent
☐ Foster parent ☐ Carer ☐ Other (please state):

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss
☐ Other (please state):

[illegible][illegible][illegible]

--	--	--	--	--	--	--	--

[illegible][illegible]

☐ Mother
 ☐ Father
 ☐ Step-parent
☐ Foster parent
 ☐ Carer
 ☐ Other (please state):

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss
☐ Other (please state):

[illegible][illegible]

--	--	--	--	--	--	--	--

[illegible][illegible]

--	--	--	--	--	--	--	--

Please return this application form to: nailsch@nailseaschool.com or post to Nailsea School, Mizzymead Road, Nailsea, North Somerset, BS48 2HN.