



## Guidance notes for parents applying for a nursery place at a Tower Hamlets community nursery school

Nursery education is provided in a range of settings in Tower Hamlets. This application is for admission at a community school. Children will normally attend either a nursery school or a nursery class attached to a primary school. Some schools provide nursery education in an Early Years Unit attached to their school (EYU). The EYUs accept children aged from three to five years inclusive. All of these schools offer a mixture of part time places (either a morning or an afternoon) and full time places.

All children aged three and four are entitled to 15 hours a week free nursery education during school term times (38 weeks a year), from the term following their third birthday.

The actual age at which children can start will depend on the number of places available but will not be until the term after they turn three. In exceptional circumstances a child may start in the term they turn three but this will need agreement from the local authority.

### WHAT YOU MUST DO

You will have received this form from the school you wish your child to attend. You must complete a form for each school you wish to apply to and submit directly to the school by the closing date 27 January 2017.

Nursery places at community schools will be offered in line with the admission policy (see over page).

Schools will announce all offers on the borough-wide offer date 8 May 2017.

Relevant and accurate information is required on the application form to determine whether your child should be offered a place in line with the admissions criteria, but also whether to offer your child a full or part time place.

The information you need to put on your CAF, is as follows:

#### Section 1 – Child's details

- Child's name – this should be your child's legal name given on their birth certificate or passport. You are responsible for making sure that you have used the same name on all the forms needed for your child's application. If you do not use the same name, we may not be able to deal with the information in your child's application.
- Child's date of birth – please put the figures in the day, month and year boxes.
- Child's sex – please tick the relevant box to show if your child is male or female.
- Child's address – this must be the permanent address where the child lives with their parents or legal guardians and where Child Benefit is addressed.

NB. The school at which a place is offered will need to see proof of the child's address (a child benefit letter from the DWP or medical card), proof of your address (the current year's council tax bill or statement, and a recent utility bill). Documents must be dated within the last three months before your child's admission. The name of your child and your name and address on these documents must match the information on your application form.

#### Section 2 – Name of the school you are applying to

- Please complete this form for each school that you wish to apply to and submit it to the school by the closing date.
- Sibling – if your child has a brother or sister (sibling) at the school you named as a preference, please give the name, date of birth and sex of any brother or sister who is already at that school (or the link school for separate infant and junior schools).

#### Section 3 – Medical or social needs

- Please tick the relevant box to show if your child has any additional medical or social needs and make sure you attach a statement of support from a relevant medical or social care professional. These reasons can include factors affecting the child, the parents or other family members and must explain why the preferred school is the most suitable school as well as the difficulties that would result if the child had to attend another school.

#### Section 4 – Children who are Looked After

- Please tick the relevant box if the child is in the care of the local authority. This can include children looked after by the local authority, previously looked after children who left care under a residence or special guardianship order, or those adopted from local authority care. Please tick the relevant box if the child is privately fostered and also give details of the fostering arrangements.
- If a child is not living with their natural parents and you are looking after the child, 'privately fostered', we need to see written evidence that you are the legal guardian and have parental responsibility for that child. Evidence includes a will or a court order or a statutory declaration. Guardianship only applies if you can prove that you have full care of the child and their normal, permanent home is with you. Guardianship does not apply when picking up children to and from school, or looking after them until their parents collect them. If you cannot prove guardianship, we will refer the application to social services while we process your form.

## Section 5 – Parent’s or carer’s details

This should be the person or people with parental responsibility for the child named in Section 1.

- Please give your full name and contact details, and tick the relevant box to show your title and relationship to the child named in Section 1 (e.g. tick ‘other family member’ if you are a sister caring for the child).

Please remember to provide documents to prove you are the legal guardian if you are not the child’s natural parent. If your address is different from the child’s address, please explain why on a separate sheet of paper. Also, if the child’s parents share custody, please state this and give both addresses on a separate sheet of paper.

## Section 6 – Working parents and parents in full-time education

- Please state in this section whether both parents/single parent work full-time or are in full-time education. This information will be used to determine priority for a full-time place. Confirmation of employment and education hours will be required.

## Section 7 – Preferred hours

Schools offer full-time and part-time places. These are offered in line with the following priorities:

- Children with SEN
- Children looked after by the local authority (or previously looked after)
- Children for whom it is deemed there is strong medical or social reason
- Parents working full-time or in full-time education.

## Section 8 – Declaration and signature of parent(s) or carer(s)

- The person with parental responsibility for the child named in Section 1 must sign the declaration to confirm they have read and understood the information in the guidance notes and that the information they have given is accurate.

## Section 9 – Other information

Please let us know if you have filled in an application form for any other children. Please write the name and date of birth in this section.

The Admissions policy and catchment areas is available on the Tower Hamlets website:

[www.towerhamlets.gov.uk/schooladmissions](http://www.towerhamlets.gov.uk/schooladmissions)

# ADMISSION POLICY TOWER HAMLETS COMMUNITY SCHOOLS

## Priority 1

Children looked after by the local authority, previously looked after children who left care under a residence or special guardianship order, or those adopted from local authority care.

## Priority 2

Children for whom it is deemed there is strong medical or social reason to attend the school/nursery applied to.

## Priority 3

Children living within the catchment area who have a sibling attending the school (including the school of separate infants and junior schools) and who will continue to do so on the date of admission.

## Priority 4

Children who live within the catchment area of the school and for whom the school applied for is their nearest community school within the catchment area.

## Priority 5

Other children from within the catchment area of the school.

## Priority 6

Children living outside of the catchment area of the school applied to.

## Tie-break

In the event of oversubscription within categories 3, 4, 5, and 6 above, priority will be given to children who live closest to the school by the shortest walking distance.



# Common Application Form (CAF) Nursery 2017/18



TOWER HAMLETS

Admissions stamp only

Date received

Staff initials

ID:

- Please use black ink and BLOCK CAPITALS and tick any boxes that apply.
- Please carefully read the attached guidance notes before filling in this form.
- You must return your filled-in application to your child's infant school by no later than **27 January 2017**.

## 1. Child's details

First name:

Last name:

Date of birth:

Day   Month   Year     Sex: Male  Female 

Home address:

  
  
 Postcode: 

(The child's home is the permanent address where they normally live with their legal guardian. If this is different from the parent's or carer's address, please explain why on a separate sheet of paper. Also, if parents share custody, please give both addresses on a separate sheet of paper.)

## 2. Name of the school your are applying to

Name of school:

If the child named in Section 1 has a brother or sister at this school or the link school, please give details below:

First name:

Last name:

Date of birth:

Day   Month   Year     Sex: Male  Female 

## 3. Medical or social needs

Does your child or any other family member have needs we should know about?  
(this includes disabilities or severe medical conditions)

Yes  No 

If 'Yes', please provide details and also attach report from a relevant medical or social care professional to your application form.

## 4. Children who are 'looked after'

Does the child have 'looked after' status as explained on page 1 of the guidance? Yes  No

If 'Yes', please name the local authority that can confirm this:

Is the child privately fostered? Yes  No

If 'Yes', please give details.

## 5. Parent's or carer's details

### Parent/carer 1

Title: Mr  Mrs  Ms  Miss

First name:

Last name:

If 'other family member or other contact', please state which.

Home tel:

Mobile:

Email:

Address (if different to child's address)

Relationship to the child: Mother  Father   
Step-parents  Foster parents  Social worker   
Other family member  Other contact

### Parent/carer 2

Title: Mr  Mrs  Ms  Miss

First name:

Last name:

If 'other family member or other contact', please state which.

Home tel:

Mobile:

Email:

Address (if different to child's address)

Relationship to the child: Mother  Father   
Step-parents  Foster parents  Social worker   
Other family member  Other contact

## 6. Working parents and parents in full-time education

If both parents/single parent work, please state the hours below or if you are in full-time education please state this below.

## 7. Preferred hours

Schools offer full-time and part-time places, please state your preferred hours.

Full-time: Yes  No  Part-time (AM): Yes  No  Part-time (PM): Yes  No

## 8. Your declaration and signature

- I have read and understood the guidance notes attached and want to apply to for a nursery school place.
- I confirm that I am the person with parental responsibility for the child named in Section 1 who lives in the borough of Tower Hamlets and that, as far as I know, the information I have given is correct.
- I understand that if I give any false or deliberately misleading information on this form, or supporting information, this application will no longer be valid and you may withdraw the offer of a school place. We may pass the information you give on this form to schools inside or outside the borough or to other local education authorities as part of the admissions procedure.

Parent/carer 1 signature

Date

Parent/carer 2 signature (if applicable)

Date

We may pass the information you give on this form to schools inside or outside the borough or to other local education authorities as part of the admissions procedure. We will pass the information to the school the child is offered a place at, where it will form part of the pupil database that the school keeps. We will deal with any personal information you provide in line with the Data Protection Act 1998.

## 7. Other information

If you have applied for a school place in this borough for any other child, please give their name and date of birth.

First name:

Last name:

Date of birth:

Day   Month   Year

## Checklist

Before returning this section to the parent please make sure you have done the following:

Checked that your child's address is correct and the child's home is the permanent address where they live with their legal guardian and where Child Benefit is addressed.

Yes  No

Read the guidance notes attached.

Yes  No

If necessary, enclosed any supporting evidence (e.g. a letter from the family doctor or consultant to support any medical claim).

Yes  No

Filled in all relevant sections of this form.

Yes  No

**Return the filled-in paper form to your child's infant school no later than 27 January 2017.**

## Important Information

- If any of the details about you or your child change, please tell us immediately in writing.
- If we can prove that your child has been offered a place based on false, misleading or inaccurate information, we will withdraw the place.
- We will issue decision letters for on-time applications by post on 8 May 2017.
- If you need any more information, please contact the school you are applying to.

