



**WARWICKSHIRE COUNTY COUNCIL
APPLICATION FOR ADMISSION TO NURTURE NURSERY
AND KENILWORTH NURSERY SCHOOL**

Name of Parents/Guardians:
 Address
 Post Code
 Home Tel No:
 Mother's Mobile No:
 Father's Mobile No:

Full name of child: Forenames _____ **Surname:** _____
Child's date of birth:..... **Male** **Female**

Particulars of other children in the family		
Name(s)	Date(s) of Birth	School(s) attended (if applicable)

Father's Occupation
 Address of employer: _____ Works Tel No: _____
 Mother's Occupation
 Address of employer: _____ Works Tel No: _____

In the **MAIN NURSERY** do you prefer: a morning place an afternoon place no preference
 Are you interested in a place in the **NURTURE NURSERY** for your child?
 YES NO

Name & Address of Family Doctor:
 Any physical, medical or behavioural problems of which the school should be aware? Please give details:

Signature of applicant(s).....Date:

OFFICE USE	MN ADMISSION	NN ADMISSION	EXCEL	SIMS	DISTANCE TO SCHOOL