



Runnymede St. Edward's Catholic Primary School

Admission Form for Pre-School

- **This form must be completed by a Parent/Guardian and returned to Runnymede St Edward's School.**
- Please be aware, a place in the Pre-School does not guarantee automatic admission to Reception at Runnymede. Please follow your Local Authority Admission Processes.
- This application form is for a place in our Pre-School, full time on the basis of eligibility of the 30-hours per week offer.
- Parents/Carers who are not eligible for the 30-hours per week offer have the opportunity to pay for the additional 15 hours.
- Pre-School is for children age 3+.

Child's Details

Surname of child		Forename(s)			
Date of birth of child		Gender	Female		Male
Permanent address of child (including postcode)					

Is the child in the care of the local authority?	Yes		<i>If yes, please provide professional documentary evidence</i>	No	
Has the child previously been in the care of the local authority?	Yes		<i>If yes, please provide professional documentary evidence</i>	No	
Does the child currently have a social worker?	Yes		<i>If yes, please provide professional documentary evidence</i>	No	
Is your child eligible for Free School Meals	Yes		<i>If yes, please provide documentary evidence</i>	No	

Will the child have a sibling on roll at Runnymede St Edward's Catholic Primary School on 1 st September 2025?	Yes		Siblings Name		No	
Was a parent a member of staff in September 2024, and continues to be?	Yes		Staff Name		No	

Ethnicity		First Language	
NHS Number		GP	

Are there any developmental, health or physical needs (including disabilities and allergies) relating to your child which the Pre-School should know about? If Yes, please provide details:

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Parent / Guardian Details

Surname of Parent / Guardian 1		Forename Parent / Guardian 1	
Surname of Parent / Guardian 2		Forename	
Address (including postcode)			
Emergency Contact Number 1	Name		Relationship to child
	Mobile		Email address
Emergency Contact Number 2	Name		Relationship to child
	Mobile		Email address

Funding

Full Time 30 hour funding	Yes		No		If yes, please provide your 30 hour code	
15 hour funding, 15 hours paid	Yes		No			

Declaration by Parent/Guardian

I understand the admissions process and I declare that the information given on this form is accurate and subject to verification. I understand that any alteration to the form must be initialed by the person who signs it.

I understand that in the event of the school being over-subscribed there is no guarantee that a place will be available at the Pre-School for my child and a random allocation will take place.

I agree to reconfirm funding arrangements when requested, and provide prompt payment of fees to ensure my child's place remains available.

I understand that failure to provide my child's 30-hour eligibility code will result in my child's place being withdrawn at the end of that week, that my child will be refused admission and their place will be offered to a child on the waiting list. I understand that I will have the option to pay for the additional 15 hours to keep the place open to my child.

I understand that fees will be payable monthly, and will include all days regardless of attendance. This includes closure of the facility due to weather conditions or incidents beyond our control.

I will give a term notice if I wish my child to be withdrawn from the Pre-school.

I will provide an original birth/adoption certificate for my child as proof of birth date.

I will provide 2 forms of proof of address.

I understand the information provided on this form will be processed in accordance with the requirements of the Data Protection Act 2018 and General Data Protection Regulations (GDPR). It will be treated as confidential and will only be used for the purposes of the provision of education services. In connection with this purpose, the information may also be processed to prevent any fraud or criminal offence or to ensure the health, safety and welfare of any child. In pursuit of these legitimate purposes, the information may be shared with other admitting authorities to ensure that parents / carers do not hold on to more than one offer of a place. The information may also be shared with any organisation legitimately investigating allegations of fraud, criminal offences or child protection.

This form will be processed in accordance with the requirements of the Data Protection Act 2018 and General Data Protection Regulations (GDPR) and the Data Protection Policy of Runnymede St Edward's Voluntary Aided Catholic Primary School.

I confirm that I am the person with parental responsibility for the child named in the application.

Signed		Relationship to child	
Print Name		Date	

Office Use Only:

Place agreed by		Date	
Original DOB evidence seen by		Date	
Proof of Address seen by		Date	
LAC Evidence seen by		Date	
FSM Evidence seen by		Date	
Input into Arbor by		Date	