



St John' s Catholic Primary and Pre-school

Application Form

Tel : 01884 253630

Email: sbm@stjohnstiverton.co.uk

Website: www.stjohnstiverton.co.uk

Our Waiting List is deemed by order of application, as this is deemed to be the fairest system for all families. The Waiting List will be closed at the start of the term prior to intake (ie for January intake the Waiting List is closed in September; for Easter intake the Waiting List is closed in January; and for September intake the Waiting List is closed in March).

Places may still be applied for after closure of the Waiting List, but places are then allocated on a first come first served basis.

This Application Form needs to be completed and returned to the school office, in order to put your child's name onto our Waiting List.

Childs name : _____

Name by which they wish to be known at Pre-school: _____

Date of Birth : _____

Home address : _____

Email : _____

Home tel no : _____ Work Tel no _____

Mobile tel no : _____

(Further numbers will be requested on the Registration Form)

Parents/Carers names _____

Sessions Form

Children may start at St John's Foundation Stage at the start of the term in which they have their third birthday, and one half-term's notice is required for any cancellation.

Please complete the form below to indicate which sessions you wish to book. The Early Years Leader will then contact you the term before your child is due to start to confirm availability of sessions, or to discuss other possibilities, if necessary. A taster session is offered at which we will ask you to complete your Registration Form and Child Information Form **Please bring your child's birth certificate or passport and record of immunisations.**

Child's name _____ Date of Birth _____

Month/year start Pre-school _____ Month/year start school if known _____

| Sessions | Monday | Tuesday | Wednesday | Thursday | Friday |
|---------------------------------------|--------|---------|-----------|----------|--------|
| Breakfast Club 8.00-8.50 am | | | | | |
| Preschool am 8.50-11.50am | | | | | |
| Preschool pm 11.50am-3.20pm | | | | | |
| After School Club 3.30 - 4.30 pm | | | | | |
| After School Club 4.30 – 5.45pm | | | | | |
| ASC on Fridays only runs until 4.30pm | | | | | |

Funded hours may be used across 8am – 5.45pm

Please tick the relevant boxes to indicate which sessions you would like your child to attend. You may indicate sessions you would like your child to increase to as they settle in to their new routine. Please speak to the school office staff if you wish to change (add or reduce) the sessions.

| Date of Child's Birth | Term in which funding starts |
|----------------------------------|--|
| Before 31 st March | Summer Term (after Easter holidays) |
| Before 31 st August | Autumn Term (after summer holidays) |
| Before 31 st December | Spring Term (after Christmas holidays) |

(If your child attends more than one setting please speak to the school office staff to discuss funding)

Parents/carers signature _____ Date _____