



PARTNERSHIP NURSERY APPLICATION FORM

Please complete the information below and email the school office info@sincalirlive.net or info@manselpark.net

Child's name

Date of Birth/...../.....

Gender: Male/Female



Address

..... Post Code.....

Parent/carer name.....

Contact number(s) Email.....

Which nursery is required (please tick):

- Sinclair Nursery 
- Mansel Park Nursery 

Please tick the option(s) below that you are interested in

OPTION 1	5 morning sessions each week – 8.45-11.45 (15 hours funded)	
OPTION 2	5 afternoon sessions each week – 12.45-3.45 (15 hours funded)	
OPTION 3	2 Whole days - 8.15-3.45 (15 hours funded)	
OPTION 4	4 Whole days - 8.15-3.45 (30 hour free childcare for working parents)	
OPTION 5	Mansel Park ONLY Wrap Around Care for 2/3/4year olds (7:15am-5:00pm)	
OPTION 6	Mansel Park ONLY 2year old provision (funded/not-funded)	
OPTION 7	+ Extra paid hours required (please specify)	

REASONS FOR REQUESTING OPTION 3, 4, 5 or 6	Please tick which applies to you...
I work and this would fit in with my work pattern. Place of work -	
I am studying/following a course and this would fit in with my study. Course details: Place of study – Course or qualification -	

Additional Information about your child: (Please note any medical conditions/ allergies / special needs / behavioural support needs / speech and language needs):

FOR ADMIN USE ONLY	Term/Year due to start:	Offer made to parents:	Forms given to parents:	Forms completed and returned: