



Application Form for a Nursery Place at a Victorious Academies Trust School

Which School are you applying to: _____

Name of child: _____

Date of Birth: _____ Gender? Girl / Boy

Home address : _____

Post code: _____

Parent/Carer Details: Forename: _____ Surname: _____

Relationship to child: _____ Mobile Number: _____

Email address: _____

Does your child have any Special Educational Needs or special circumstances e.g. medical condition for which a nursery place would be of extra benefit? Please provide details:

Does your child have a sibling currently attending the school? Yes / No

If so who? _____

I would be interested in, please tick below:

30 Hour Place 15 Hour Morning Session 15 Hour Afternoon Session

(Please note we cannot guarantee you will receive your preferred choice and not all schools offer all choices, for specific school Nursery places please see their websites.)

Please Note being offered a place at our Nursery does not automatically guarantee a place in a Reception Class.

Please return completed form by post or email to your school of choice.

Please go to www.victoriousacademies.org/applying-for-a-place for contact details of your choice of school.