



# Pre-Admission Form 2021

SURNAME .....

FORENAMES(S) .....

NAME KNOWN BY .....

DATE OF BIRTH .....

MALE/FEMALE .....

RELIGION (Christian, Muslim etc).....

HOME LANGUAGE .....

PARENT / GUARDIAN'S NAMES

.....

.....

CHILD'S HOME ADDRESS .....

FATHER/MOTHER ADDRESSES (if different)

.....

.....

.....

.....

POST CODE .....

POST CODE.....

HOME TEL.NO.....

MOBILE NO.....

MOBILE NO.....

E-MAIL ADDRESS .....

OTHER CHILDREN IN SAME HOUSEHOLD.....

IS YOUR CHILD CONSIDERED TO BE CURRENTLY OR PREVIOUSLY 'LOOKED AFTER'?

Yes/No (please delete as appropriate)

Adopted

Child Arrangement Order

Special Guardianship Order

SIGNIFICANT HEALTH DETAILS (if any) .....

OTHER PROFESSIONALS:

Medical Paediatrician

Speech Therapy

Social Services

or specialist care

Prevention Team (eg Family Outreach Worker)

ENTRY TO: Nursery

Reception

Year 1

Year 2

Date Registered: .....

System entry date .....

*NOTES OFFICE USE ONLY:*