

St. Andrew's Catholic Primary School



Windrush Close, Solihull, West Midlands, B92 8QL. Telephone: 0121-743 5675 e-mail: office@st-andrews.solihull.sch.uk website: www.st-andrews.solihull.sch.uk

Application for a nursery place - Academic Year 2025/2026

Child's details								
Surname								
Forename				Gende	r			
Middle name				Date of	f birth			
Current childcare								
W								
Home address								
Flat no / building name Number / street								
District								
Town				Post co	nda			
TOWII				1 031 00	Jue	<u> </u>		
Contact details for par	ent/carer							
Title: Mr/Mrs/Miss/Ms			Phon	e (day)				
Surname					one (evening)			
Forename			Phon	e (mobi	le)			
Email address								
Relationship to child					Do you have parental responsibility? Yes / No			
D (1) 1		. 11						
Brothers or sisters wh	io will be at	tending at the sam						
Name:			DOB:					
Name:			DOB:					
Name:			DOB:					
Name:			DOB:					
Additional informatio						W / N		
Does your child have an education, health and care plan?				Yes / No				
Is your child "looked after" by a local authority (in care)?						Yes / No		
If yes, which local authorit	y?							
Faith								
Please attach a copy of b if applicable.	aptism certi	ficate or a letter fron	n your j	priest co	onfirmin	g that your child is	baptised,	
		76 111						
Is your child baptised?	Yes / No	If yes, which de	enomina	ition?				
Is your child baptised? Place of baptism	Yes / No		enomina Baptism			Certificate a	ttached 🗆	



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Proof of home address		
Please provide evidence of your home address ie Council Tax Bill	Attached	
Proof of Date of Birth		
Please provide a copy of your child's Birth certificate	Attached	
Funding of Nursery provision		
Are you entitled to '30' hours extended entitlement?	Yes / No	

Please note:

For further details on the 30 hours extended entitlement, please visit: http://www.solihull.gov.uk/Resident/children/childcare/extendedentitlement3and4years.