

The Federation of Fairfield and Colneis

Fairfield Infant School
High Road West
Felixstowe
Suffolk
IP11 9JB
Tel: 01394 283206
www.fairfieldinfant.co.uk



Headteacher
Mr Mark Girling

Deputy Head
Mr Keith Rimmer

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Colneis Junior School
Colneis Road
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APPLICATION FORM FOR ADMISSION TO FAIRFIELD INFANT SCHOOL NURSERY CLASS

Please return this form along with your child's birth certificate. Applications can be made after your child's 2nd birthday.
All applications must be returned by 31st January. Only printed paper copies will be accepted.

Please refer to <https://www.suffolk.gov.uk/children-families-and-learning/childcare-information-and-support-for-parents-and-providers/guidance-for-parents-and-carers/30-hours-childcare-for-working-parents/> if you require information regarding your childcare entitlement.

PLEASE PRINT IN CAPITAL LETTERS

Child's surname:		First name/s:	
Date of Birth:		Male/Female	
Is he/she a Child in Care?	YES/NO	Siblings in school:	YES/NO
Parent/Carer's surname:	Initials:	Mr/Mrs/Miss/Ms (Please delete as appropriate)	
Full address:			
Postcode:		Telephone number:	

The Federation of Fairfield and Colneis is committed to safeguarding and promoting the welfare of children.



Sue Cook - Director for
Children and Young
People's Services



Fairfield Nursery is my catchment area school's nursery YES NO

Preferred Nursery session: Morning Afternoon Either

Number of sessions: (maximum of 5)

(Please note that whilst Fairfield Infant School Nursery participates in the 30 hours child care scheme, the maximum number of hours that we currently offer is 15 which is 5 x 3 hour sessions. Preference will be given to those wanting 5 sessions unless this is part of a dual placement with a special school nursery. HOWEVER for admissions in 2019/20 we are exploring the possibility of offering the full 30 hours which would include both morning and afternoon sessions. Please indicate if this would be of interest to you by ticking the box

Please name any other pre-school or special school nursery which your child will be attending:

..... Number of sessions.....

Will your child require any additional support YES/NO

Does your child have an EHC Plan YES/NO

The above information is true to the best of my knowledge and belief. I understand that if a place is offered on the basis of any false information given by me, the place can be withdrawn at any time by the Local Authority. I authorise the school to claim for the sessions indicated above.

Parent or Carer's signature..... Date.....

NB: Admission to Nursery Class does not guarantee a full-time place in the school to which the nursery is attached. A separate application for a full time place in the school must be made.

 Your child can stay in a school nursery class until the September following their 4th birthday, when a reception class place will be offered.

FOR OFFICE USE ONLY

Birth certificate seen: Yes..... No..... In catchment..... Out of catchment.....