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## Nursery Consideration Form

<b>Childs Date of Birth</b>	
<b>Childs Full Name</b>	
<b>Address</b>	
<b>Post Code</b>	

<b>Is the child in care (looked after child)?</b>	<b>(Please circle)</b> Yes    No
<b>Is there a Child Protection Plan in place?</b>	Yes    No
<b>Is there any previous social care?</b>	Yes    No

### Parents Contact Details

<b>Mothers Name</b>	
<b>Telephone Number</b>	
<b>National Insurance Number</b>	

<b>Fathers Name</b>	
<b>Telephone Number</b>	
<b>National Insurance Number</b>	

<b>Who is making this request?</b>	
<b>Additional educational, medical or social needs.</b>	
<b>Main Language Spoken at Home.</b>	
<b>Has he/she got any brothers or sisters in school? Please supply names and ages</b>	

**Are you happy for information to be shared with other appropriate professionals? Yes/No**

Signed.....