**APPLICATION FORM FOR A CHILD PLACE**

**Childs Full Name:**

**Sex: Date of Birth:**

**Parents Names who have parental responsibility for the child:**

**Mobile Number:**

**Email Address:**

**Address:**

**Nationality: Religion:**

**Home Language:**

**Languages spoken by child:**

**Does your child have any special educational needs/disabilities?**

**Yes/No (If Yes, please give details, including support received i.e. speech therapist, occupational therapist or other)**

**Does your child have any specific dietary requirements including allergies or preferences (i.e. gluten or dairy free, vegan or vegetarian?)**

**Does your child have any medical requirements? (i.e. inhaler, epipen) No**

**GDPR (2018).** Buckles and Bows (the ‘Nursery) respects your privacy rights and is committed to ensuring that it protects your details, the information about your dealings with the Nursery and other information available to the Nursery (‘your information’). In accordance with the GDPR (2018), the Nursery will use your information, for the purpose of providing support to children, to (a) deal with your requests and administer its departmental functions, (b) meet its statutory obligations, and (c) prevent and detect fraud. The Nursery may share your information (but only the minimum amount of information necessary to do the above and only where it is lawful to do so) with appropriate departments and agencies in accordance to the Multi Agency Information Sharing Protocol (MAISP). Further details including a copy of the MAISP can be found at [**www.surreycc.gov.uk**](http://www.surreycc.gov.uk). If you would like to apply for access to the information we hold about you please send a written request to: Administrator, Buckles and Bows Pre-School Nursery, Ongar Hill, Addlestone, Surrey, KT15 1BP.

Please tick to say that you have read and consent to this ☐

**\*We wish to guarantee a place at Buckles & Bows Pre-School Nursery from …………(Date)** ☐

**\*We wish to go on the waiting list** ☐

**(\*Delete where applicable)**

**Please indicate which funding you require: 15 hours** ☐ **30 hours** ☐ **FEET** ☐

**I/We have read and agree to the GDPR (2018) statement on page 1.**

**Signature of parent Date**