

**Plimsoll Building**  
**4 Wollstonecraft St**  
**London N1C 4BT**  
**Tel:** 020 7504 0533  
**Email:** [admissions@kingscrossacademy.org.uk](mailto:admissions@kingscrossacademy.org.uk)  
**Website:** [www.kingscrossacademy.org.uk](http://www.kingscrossacademy.org.uk)  
**Headteacher:** Emyr H. Fairburn



King's Cross Academy

<b>Administration (office only)</b>	
Distance:	Intake Group:
Intake Year:	Year Group:
<b>NURSERY APPLICATION FORM</b>	
<p><b><i>Before completing this application please read the nursery admission policy available on our website – if you require a paper copy, large print text or a translation please contact us at the address above.</i></b></p>	
<b>Child's details</b>	
First Name:	Family name:
Date of birth:	Gender : Boy /Girl (please delete one)
Country of Birth:	Nationality:
Borough:	
<b>Parents' or legal guardians' details</b>	
Parent 1 Name:	Relationship:
Parent 2 Name:	Relationship:
Do both parents have parental responsibility? If no, which parent has parental responsibility? .....	
Parent 1	Parent 2
Address:	Address:
Post code:	Post code:
Home Phone Number:	Home Phone Number:
Work/mobile:	Work/mobile:

Email address:	Email address:
----------------	----------------

**Priority for admission**

Is your child (please cross/tick):

In public care (looked after) or known to children’s integrated services/social worker/Family Services **Yes/ No**

Known to an Educational Psychologist, Speech and Language Therapist, Occupational Therapist or any other service? **Yes/ No**

Have a Special Educational Needs Plan (or EHCP) **Yes/ No**

(if yes please attach a copy)

Does your child have a Special Educational Need such as Autism, etc? **Yes/ No**

**If yes, please provide further details on a separate sheet or submit supporting evidence**

Is there currently a brother or sister attending the Academy? **Yes / No**

If yes please provide name(s):

Any medical needs or dietary requirements?

**Other Information**

Language spoken at home:

Does your child currently attend another nursery? **Yes/ No**

If yes please give the name of the nursery:

**All places at this nursery are currently fully funded from 9.00am to 12.00pm. Lunch is included as part of the morning session and is available at an additional cost unless you are eligible for Free School Meals.**

**Extended Service (fees apply)**

Extended services are available throughout the week but must be booked at least half a term in advance.

Available services

Option	Fee
Breakfast Club (Rise and Shine) 8.00am – 9.00am	£4.10 per hour
After School Club (Plimsoll Plus) 3.00pm – 6.00pm	£4.10 per hour

**Please note that the information held at the Academy in respect of its pupils, and the disclosure of such information, complies with Data Protection legislation.**

**I confirm that the above information is correct at the time of completing this form**

Signature:

Date:

**Please note:** Applying for the Academy nursery does not guarantee that a place will be offered. A place in the school nursery does not give an automatic right of transfer to reception. A reception class application will need to be made online through Camden admissions' department at the appropriate time.

Once completed please send this form to **King's Cross Academy, Plimsoll Building 4 Wollstonecraft St, King's Cross, London N1C 4BT** or email to: [admin@kingscrossacademy.org.uk](mailto:admin@kingscrossacademy.org.uk)