

Welcome to Sacred Heart RC Primary School, Battersea

Within this school, we aim to create a supportive, friendly environment suitable to the young child, where the foundations of a good all-round education are laid.

Support from home is a vital factor in providing your child with a secure base for learning. This means that parents understand that we are not child minders but educators who, working with you in partnership, are laying foundations for the future while enjoying the present.

As a Catholic school we try to give the children a high moral framework, based on the Gospel values. We support the family in their teaching of the Catholic faith.

I hope that your child's days in our school will be both happy and fruitful.

Mr. Jared Brading
Executive Headteacher

Please note that all applications should be accompanied by the following:

- Original copy of your Child's Birth Certificate.
- Two proofs of your address e.g. Utility Bills, Bank Statement, etc. that are not more than 3 months old.
- Original copy of your Child's Baptismal Certificate.
- Supplementary Form.



**The Federation of Sacred Heart and St Mary's
Catholic Primary Schools, Battersea**



Sacred Heart R.C. Primary School, Battersea

Este Road, Battersea, London SW11 2TD

Tel: (020) 7223 5611

Email: admin@sacredheart-battersea.wandsworth.sch.uk

www.sacredheartschoolbattersea.co.uk

Executive Headteacher Mr Jared Brading

Associate Head Mrs Nicola Byrne

Child's Name: _____

Date of Birth: _____

Date Application Received: _____

Nursery Application: _____

Check List:

Child's Birth Certificate: []

First Proof of Address: []

Second Proof of Address: []

Baptism Certificate: []

Dedication Letter or Other: []

Priest Letter: []

Currently on roll in our Nursery: []

Sibling: []

Criteria Number:

If you do not provide the required evidence as above, it could impede your application and could have an effect on the criteria that your child will be ranked.

Applicant's Signature: _____

FAMILY DETAILS

Date:

Name of Child:

Date of Birth: **Certificate Seen: YES / NO**

Home Address:
.....

Post Code: **Home Phone:** **Day Phone:**
Mobile Phone:

No. of Children in Family: **Position in Family:**

Previous Schools or Nursery:

Type of Nursery (e.g. Social services, Private, etc.):

Father's Full Name:

Father's Address if different to above:
.....
.....

Phone Numbers:

Email Address:

Father's Country of Origin:

Mother's Full Name:

Mother's Country of Origin:

Name of any Person other than above who has Parental Rights:
.....

Address:

Phone Number:

Email Address:

Brothers or Sisters attending Sacred Heart RC Primary School:

Name: **D.O.B:**

Name: **D.O.B:**

Brothers or Sisters attending Other Schools:

RELIGIOUS DETAILS

Child's Religion:

Date of Baptism:

Place of Baptism:

Certificate Seen: **YES / NO**

Father's Religion:

Church Father Attends:

Mother's Religion:

Church Mother Attends:

Reminder to Parents:

As you have chosen to send your child to a Catholic school it is important that you set a good example by taking your child to church on Sunday and living out the gospel values in your family. You promised to do this at your child's Baptism.

THE CATHOLIC SCHOOL will work with YOU and the PARISH in helping your child to know, experience, celebrate and live the gospel values.

PHYSICAL DETAILS

Has your child any known Allergies?

Does your child suffer from any Illness? (*Please name*):

Does your child take regular Medicine?

Is your child Toilet Trained?

Can she/he attend to her/his own needs in the Toilet?

Family Doctor's Name:

Address:

Health Visitor:

Clinic:

Does your child have any Special Interests/Hobbies e.g. Sport, Drama, Art, Dance, Reading, Computers etc.?

How does your child Travel to School?

Please Circle: Bus Train Walk Car Bike Scooter

Child's View (To be completed by child if present):

What would you say are your Strengths and Weaknesses?

BACKGROUND DETAILS

Previous Schools or Nurseries:

1. _____
2. _____
3. _____

Has your child been identified with having any Special Educational Needs? YES / NO

If yes, please give details:

Has your child received support from any of the following?

- Health Visitor**
- Sure Start**
- Speech and Language Therapist**
- Early Years Centre**
- Educational Psychologist**
- CAMHS**
- Social Services**

If yes, please give details:

Has your child been identified with being more able? YES / NO

If yes, please give details:

Do you have any concerns about your child's educational progress?

EMERGENCY CONTACT

Name of a responsible person who will take your child in an emergency:

Name:

Address:

.....

Tel.:

Relationship:

Permission Slip:

Children are often taken out during school hours as part of their education.

Please sign below if you give permission for staff to take your child out during school hours.

I give permission for my child:

To be taken off the school premises, with supervision, for school work.

Signed:

Date:

CHILD'S ETHNICITY AND LANGUAGES

Child's Ethnicity



Please tick appropriate box:

Languages exposed to (heard or spoken at home)



Any other Asian background		Acholi		Lingala / Losengo	
Any other Black background		Arabic		Luganda / Ganda	
Any other mixed background		Asante / Ashanti		Luo	
Bangladeshi		Bengali		Maltese	
Black - Ghanaian		Carib		Other	
Black – Nigerian		Cantonese		Punjabi	
Black - Somali		Croatian		Portuguese	
Black Caribbean		Dutch		Russian	
Chinese		Ebo		Singhalese	
Gypsy / Roma		Edo / Bini		Spanish	
Indian		English		Tagalog	
Latin / South / Central American		Fanti		Turkish	
Other Black African		French (Creole / Patois)		Twi / Twe / Tui	
Other ethnic group (please state below)		Greek		Urdu	
Pakistani		Gudjurathi		Urhobo	
Parent preferred not to say		Hindi		Yoruba / Owobo / Yorwoa	
Turkish		Ibo / Igbo			
White		Irish			
White - British		Italian			
White - Irish		Kinyarwanda / Ruanda			
White - Asian		Refused			
White – Black African					
White – Black Caribbean					
White – Eastern Europe					
Refused					

National Identity: _____

Nationality: _____

Multiple Nationality: (Dual Nationality if applicable)

Country of Birth (e.g., Scotland, France) _____



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Executive Headteacher Mr Brading

Associate Headteacher Mrs Byrne

APPLICATION FOR NURSERY ADMISSION 2022-2023

All sections of this Application Form and the Supplementary Form provided must be completed before the application can be considered by the Governors. Parents/Carers are responsible for ensuring this form is returned to the school office at Sacred Heart Catholic Primary School.

<u>DETAILS OF CHILD</u>	SURNAME:	FIRST NAME:
	DATE OF BIRTH:	GENDER:
	RELIGION:	FIRST LANGUAGE:

<u>DETAILS OF PARENTS/CARERS WITH WHOM THE CHILD RESIDES</u>		
PARENT 1:	SURNAME:	FIRST NAME:
	MR/MRS/MISS/MS	EMAIL:
	HOME TEL:	WORK TEL:
	ADDRESS:	RELATIONSHIP TO CHILD:
	POSTCODE:	N.I NUMBER:
PARENT 2:	SURNAME:	FIRST NAME:
	MR/MRS/MISS/MS	EMAIL:
	HOME TEL:	WORK TEL:
	ADDRESS:	RELATIONSHIP TO CHILD:
	POSTCODE:	N.I NUMBER:

<u>TYPE OF PLACE REQUIRED</u>		
Please indicate the number of hours you would like your child to attend our nursery each week and add HMRC eligibility code if applicable:		
15 hours	(5 mornings 9.00-12.00) Free universal nursery hours	Insert code:
30 hours	(5 full days 9.00-3.30) I will be entitled to 30 hours of free childcare.	
30 hours	(5 full days 9.00-3.30) I will not be entitled to additional free childcare, but would like to pay for 15 additional hours at a cost of £5 per hour.	

If you are requesting a full-time place, and are not eligible for 30 hours free funding, you will be charged a top up fee for 15 hours per week. The top up fee will be for a maximum of 38 weeks a year. Invoices must be paid in full, in advance on the dates listed below to secure the nursery place. Non-payment will result in the place being withdrawn. The half termly payments are non-refundable. Payments do not include lunch.

Half Terms 2022-2023	Term Dates	Top Up Charge 2022-2023	To Be Paid By
Autumn 1	02/09/22 – 21/10/22 (7 weeks / 1 days)	£576.00	02/09/22
Autumn 2	01/11/22 – 16/12/22 (6 weeks / 4 days)	£544.00	01/11/22
Spring 1	04/01/23 – 10/02/23 (5 weeks / 3 days)	£448.00	04/01/23
Spring 2	20/02/23 – 31/03/23 (6 weeks)	£480.00	20/02/23
Summer 1	17/04/23 – 26/05/23 (6 weeks)	£480.00	17/04/23
Summer 2	06/06/23 – 21/07/23 (6 weeks / 4 days)	£544.00	06/06/23

DETAILS OF SIBLINGS ATTENDING THE SCHOOL

Surname	First Name	Date of Birth	Class

REASONS FOR APPLICATION

If you wish to give reasons for your application, please use the space below.

Name of Current Nursery:

If your child has a medical or personal reason for needing a place, you must tick this box and provide professionally supported evidence with your application.

DECLARATION

I/We have received a copy of the Nursery School Admission Policy.

I/We realise that completion of this Application Form does not secure my child a place in the Nursery.

I/We understand that the Governing Body will only consider this application once returned to the school with a completed Supplementary Form.

I/We understand there is no automatic right of transfer from the Nursery to Reception Class at Sacred Heart Catholic Primary School.

I/We confirm that the above information is correct to the best of my/our knowledge and I/we understand that the school reserves the right to reconsider the offer of a place should the information be incorrect.

Signature Parent 1:

Date:

Signature Parent 2:

Date:

Please note, children allocated either a part time or full-time place will need to complete a short period of induction before attending complete sessions every day. In some circumstances, and based on the child's needs, it may be deemed necessary to extend this period. In some instances, a parent/carer may be expected to stay on the premises until a child has settled.

(Note: From September 2000 children attending the Nursery do not gain automatic admittance into Reception. All parents wishing to apply for a Reception place will be asked to make a new application in the following academic year. Parents will be informed of all necessary information of when and how to apply.)

Sacred Heart Primary School Battersea



At Sacred Heart Primary School Battersea our Mission is to:

Create a climate in which Christian values are taught, experienced, lived and celebrated. They are central to and shared by the whole school community - the children, staff, family, governors and parish.

Ensure every individual child is loved, appreciated and affirmed.

Enable and expect all pupils to achieve their full potential by providing a broad and balanced and relevant curriculum with equal opportunity to develop their academic, social, creative and sporting skills.

The partnership, between home and school is crucial for the children in order for excellent learning to take place.

This agreement serves to make clear the expectations of the children within our school community and our mutual responsibilities towards achieving them.

This serves as a foundation stone for the effective partnership between home and school.

Home School Agreement



Home School Agreement



What are our obligations?

As a school, in line with the school mission statement we will:

- Expect high standards of work.
- Provide effective teaching.
- Give your child's safety and well-being the highest priority.
- Expect and get high standards of behaviour.
- Keep you informed of your child's progress and attainment and send an annual report to you.
- Set homework regularly in line with our school policy. Monitor lateness and attendance.
- Treat you with courtesy and try to meet your aspirations for your child.
- Keep you informed about school activities through the weekly newsletters.

As a family you will:

- Give your child every support to achieve the highest standards.
- Follow the school's health and safety guidelines as set out in the school prospectus.
- Support the school's policies and guidelines for behaviour.
- Attend the parent-teacher consultations and take an active part in monitoring your child's progress.
- Support your child in homework and ensure that it is completed.
- Ensure regular attendance and punctuality: sending a note to explain all absences and telephoning on the day to explain any absence.
- Treat all members of staff with courtesy and assist the school in meeting our aspirations for your child.
- Keep the school informed of any changes in circumstances at home.
- Ensure your child wears correct school uniform. Provide any equipment or other clothes required.
- Follow the complaints procedure if you are not satisfied with any aspect of the school.

Child's name: _____

Class: _____

Parent's signature: _____

Date: _____

Head teacher's signature: _____

Date: _____



Federation of Sacred Heart and St Mary's RC School, Battersea

Please complete and sign the form below and if you are Catholic, hand it to your Priest or the Parish Priest at the Church at which you normally worship.

He will add his reference in Part 2.

If you are not Catholic, please hand the form to your priest, minister or faith leader who will add his or her reference in Part 3.

PART 1 (To be completed by all Parents or Carers)

Child's Forename: _____ Surname: _____
Religion/Denomination: (e.g. Roman Catholic) _____ Boy <input type="checkbox"/> Girl <input type="checkbox"/>
Date and Place of Baptism (if applicable): _____ *
Parents' Names: (Mother) _____ (Father) _____
Parents' Religions / Denominations: _____
Home Address: _____
Postcode: _____
Contact Numbers: _____
If Catholic, indicate which Mass you normally attend:
Saturday at: _____ time. Sunday at: _____ time.
Parish in which you live: (e.g. Sacred Heart, St Vincent de Paul) _____
Usual place of worship (if different): _____
How long have you worshipped there? _____ Years.
How often do you attend Mass? <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Occasionally <input type="checkbox"/> Not known
I confirm that the information we have given on this form is accurate and truthful:
Signed: _____ Parent/Carer Date: _____

* **Baptism Certificate:** The school will require sight of an original Baptism Certificate as part of the application. Originals will be returned.

PART 2 (To be completed by Catholic Priests only)

I am satisfied that the child is a baptised Catholic Yes No

Parent/Carer

Child

Are the parents known to you? Yes No Is the child known to you? Yes No

Weekly attendance at Mass Weekly attendance at Mass

Fortnightly attendance at Mass Fortnightly attendance at Mass

Monthly attendance at Mass Monthly attendance at Mass

Occasional attendance at Mass Occasional attendance at Mass

Not known Not known

How long have the parent(s)
attended your Church?

Comment (if appropriate) regarding the points above: If you consider that there are valid reasons for Mass attendance to be considered equivalent to weekly because of illness or other reasons, please state this below:

Priest's Name: _____

Parish (or Ethnic Chaplaincy): _____

Address: _____

Tel.: _____

Priest's Signature: _____ **Date:** _____

Parish Stamp or Seal

PART 3 (To be completed only by Priests / Ministers of other denominations or faiths)

I confirm that this family are members of our faith community The family is not known to me

Name of Minister: _____

Parish or Faith Community: _____

Address: _____

Signed: _____

Church Stamp or Seal

Please circle below:

Weekly Mass **Monthly Mass** **Occasional Mass** **Not Known**

Comment regarding the points above: (Please attach letter if required).

To the Priest, Minister or Other Faith Leader: Please return the completed form to the school.