

Early Learning and Childcare Application

Application forms will not be accepted without a copy of your child's birth certificate (for UK nationals or passport for non – UK nationals) and proof of your address in the form of a utility bill / council tax statement.

- **Only one application form should be completed per child unless applying for a split / blended place.**
- **Application forms must be returned to the provider of your first choice.**
- **If applying for a split / blended place you are required to submit a form to each provider.**
- **PLEASE REFER TO THE GUIDANCE NOTES TO ASSIST YOU IN COMPLETING THIS APPLICATION**

OFFICE USE ONLY

Date application received		Band recommended		Expected start date	
Birth Certificate No.(UK Nationals)			Passport No.(Non-UK Nationals)		Proof of address produced
District	Year	Entry No	Passport No	Yes	No

COMPLETING THIS APPLICATION FORM

SECTION 1	MUST BE FULLY COMPLETED BY ALL APPLICANTS
SECTION 2	COMPLETE IF APPLYING FOR AN ENTITLED EARLY LEARNING AND CHILDCARE 2 YEAR OLD PLACE
SECTION 3	COMPLETE IF APPLYING FOR A 3 - 5 YEARS EARLY LEARNING AND CHILDCARE PLACE
SECTION 4	SIBLING INFORMATION / INTENDED SCHOOL / ETHNICITY AND NATIONALITY INFORMATION
SECTION 5	DECLARATION BY APPLICANT MUST BE SIGNED AND DATED BEFORE SUBMISSION

SECTION 1

1a

CHILD DETAILS This information must replicate the information on the child's birth certificate or passport

Forename(s)	Known as			Gender	
Surname	Date of Birth	/	/	M	F
Address					
Town	Postcode				

1b

FAMILY DETAILS – APPLICANT – PARENT

Title	Forename(s)				
Surname					
Relationship to child	E-mail				
Home Phone Number	Mobile Phone Number				

ONLY COMPLETE IF DIFFERENT FROM CHILD'S ADDRESS

Address					
Town	Postcode				

FAMILY DETAILS – APPLICANT – PARENT / CARER NAME

Title	Forename(s)				
Surname					
Relationship to child	E-mail				
Home Phone Number	Mobile Phone Number				

ONLY COMPLETE IF DIFFERENT FROM CHILD'S ADDRESS

Address					
Town	Postcode				

1c

HEALTH INFORMATION

Does your child have any long- term illness, medical condition or disability?	Yes		No	
If yes, has there been a professional assessment identifying a disability?	Yes		No	
If yes, can you provide copies of the professional assessments?	Yes		No	

Any special dietary requirements (please state):

Does your child have any concerns / difficulty with the following? (Please tick appropriate boxes)

Speech and Language	Behaviour	Co-ordination / Movement	Sight	Allergy's
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Please provide brief details:

Child's Doctor**Health Visitor**

Name		Name	
Practice		Practice	
Address		Address	
Post Code		Post Code	
Tel. No		Tel. No	

PROFESSIONAL AGENCIES INVOLVED WITH YOUR FAMILY**AGENCY****CONTACT NAME**

Social Work		
Community Health		
Educational Psychologist		
Any other Agency	Name:	Agency:
	Name:	Agency:
	Name:	Agency:

SECTION 2**2 YEAR OLD CHILDREN – PARENTS MEETING QUALIFYING CRITERIA**

2 year old children residing in a household that are in receipt of qualifying benefits or meet the qualifying criteria's are entitled to 1140 hours of Early Learning and Childcare. Up to date evidence must be produced and verified prior to placement being allocated.

**You must indicate at least 3 choices in priority order of establishment and model of attendance.
Please note, we aim to ensure preferred choices are allocated, however there is no guarantee of this.**

Child's Name	Date of birth	Please indicate provider in order of preference 1 st / 2 nd / 3 rd	Model 1	Model 2	Model 3	Model 4	Model 5
			Mon- Fri 6 hrs per day over 38wks (term time)	2 ½ days Mon & Tues 8:10am - 5:45pm Wed 8:10 am - 12:45pm over 50 wks	2 ½ days Wed 1:50pm – 5:45pm Thu – Fri 8:10 am – 5:45pm over 50 wks	Mon – Fri 8:10am – 12.45pm over 50 wks	Mon - Fri 1.50pm – 5:45pm over 50 wks
Please indicate model in order of preference 1 st / 2 nd / 3 rd / 4 th / 5 th where available							
LA	Rainbow Family Centre						
LA	St Francis Nursery Class						
LA	Gibshill Children's Centre						
LA	Blairmore Nursery School						
LA	Glenbrae Children's centre						
LA	Wellpark Children's Centre						
LA	Glenpark Early Learning Centre						
LA	Bluebird Family Centre						
LA	St Joseph's Nursery Class						
LA	Larkfield Children's Centre						
LA	Binnie St Children's Centre						

SECTION 3

3 - 5 YEARS EARLY LEARNING AND CHILDCARE PLACE PROVIDER AND MODEL CHOICE

You must indicate at least 3 choices in priority order of establishment and model of attendance.
Please note, we aim to ensure preferred choices are allocated, however there is no guarantee of this.

Child's Name	Please indicate provider in order of preference 1 st / 2 nd / 3 rd	LOCAL AUTHORITY ONLY - Please indicate provider in order of preference 1 st / 2 nd / 3 rd				
		Model 1 Mon – Fri 6 hours per day over 38 wks (term time)	Model 2 2 ½ days Mon & Tues 8:10am - 5:45pm Wed 8:10 am - 12:45pm over 50 wks	Model 3 2 ½ days Wed 1:50pm – 5:45pm Thu & Fri 8:10am – 5:45pm over 50 wks	Model 4 Mon – Fri 8:10am – 12.45pm over 50 wks	Model 5 Mon - Fri 1.50pm – 5:45pm over 50 wks
Date of birth		Please indicate model in order of preference 1 st / 2 nd / 3 rd / 4 th / 5 th where available				

LOCAL AUTHORITY PROVIDERS

LA	Kilmacolm Nursery Class						
LA	Rainbow Family Centre						
LA	Newark Nursery School						
LA	St Francis Nursery Class						
LA	St John's Nursery Class						
LA	Craigmarloch Nursery Class (specialist service)						
LA	Gibshill Children's Centre						
LA	King's Oak Nursery Class						
LA	Blairmore Nursery School						
LA	Hillend Children's Centre						
LA	Glenbrae Children's Centre						
LA	Wellpark Children's Centre						
LA	Whinhill Nursery Class						
LA	Glenpark Early Learning Centre						
LA	Lady Alice Nursery Class						
LA	Bluebird Family Centre						
LA	St Joseph's Nursery Class						
LA	Larkfield Children's Centre						
LA	Aileymill Nursery Class						
LA	Moorfoot Nursery Class						
LA	Binnie St Children's Centre						
LA	Inverkip Nursery Class						
LA	Weymss Bay Nursery Class						

CURRENT AUTHORISED FUNDED PROVIDERS

PVI	Enchanted Forest Nursery (Greenock)		Please contact each provider to find out availability / models in their setting
PVI	Wellington Children's Centre (Greenock)		
PVI	West College Scotland Nursery		
PVI	Maderia Nursery		
PVI	Wellington Children's Centre (Gourock)		
PVI	Enchanted Forest Nursery (Inverkip)		
PVI	Duchal Nursery School - Kilmacolm		

CHILD MINDING											
CM	Childminder only	ALL ENTITLEMENT WITH A CHILDMINDER – YOU MUST CONTACT THE CHILDMINDER DIRECTLY									
Please state childminder name											
BLENDED CARE											
BC	BLENDED CARE MODEL – CHILDMINDER / PARTNERSHIP NURSERY / LOCAL AUTHORITY										
A blended care model - you may wish to split your entitlement between 2 providers– i.e. a childminder or a partnership nursery and a local authority nursery. You must contact the childminder or a partnership nursery directly to find out their availability. You must submit an application forms to each provider.											
Preference of provider – You must indicate at least 3 choices in priority order of provider and model of attendance. Please note, we aim to ensure preferred choices are allocated, however there is no guarantee of this.											
PROVIDER 1 - Childminder / Partner Nursery / Local Authority						PROVIDER 2 - Childminder / Partner Nursery / Local Authority					
1 st choice						1 st choice					
2 nd choice						2 nd choice					
3 rd choice						3 rd choice					
MODEL OF ATTENDANCE - Please tick											
OPTION 1a	Mon	Tues	Wed	Thus	Fri	OPTION 1b	Mon	Tues	Wed	Thus	Fri
DAYS						DAYS					
MORNINGS						MORNINGS					
AFTERNOON						AFTERNOON					
OPTION 2a	Mon	Tues	Wed	Thus	Fri	OPTION 2b	Mon	Tues	Wed	Thus	Fri
DAYS						DAYS					
MORNINGS						MORNINGS					
AFTERNOON						AFTERNOON					
OPTION 3a	Mon	Tues	Wed	Thus	Fri	OPTION 3b	Mon	Tues	Wed	Thus	Fri
DAYS						DAYS					
MORNINGS						MORNINGS					
AFTERNOON						AFTERNOON					

SECTION 4			
SIBLINGS			
(Please give details of any siblings who already attend the ELC setting)			
Name		Date of Birth	
Name		Date of Birth	
Name		Date of Birth	

INTENDED PRIMARY SCHOOL	
Please state the name of the Primary School you intended to send your child to	
Name of Primary School	

SECTION 5			
DECLARATION BY APPLICANT			
The information on this form will be processed electronically for administrative purposes. This information is confidential. The processing and storage of this information will comply with GDPR (EU) 2016/679 and will be held by Inverclyde Council's Education Services. Please assist us by telling the setting promptly if any of this information changes. Education Services, as part of Inverclyde Council, may share any information you give us with other Inverclyde Council Services or Government departments as required by law where relevant for their purpose i.e. Census information. We will only reveal information where we have your permission or where we have to supply information for a service that you have requested. We do not sell or rent information to anyone.			
I certify that, to the best of my knowledge, the information contained in the above Early Learning & Childcare Application Form is correct. I understand that if I give false information it will put at risk any place offered. I agree to inform the provider of any changes to my circumstances as this may also affect any place offered.			
Applicant Signature		Date	