

## Early Years Application Form



|   |                    |                |  |
|---|--------------------|----------------|--|
| <b>Child's Full Name:</b>                       |                    |                |  |
| <b>Date of Birth:</b>                           |                    |                |  |
| <b>Legal Contact Name:</b>                      |                    |                |  |
| <b>Address:</b>                                 |                    |                |  |
| <b>Contact Number/s:</b>                        | <b>Home:</b>       | <b>Mobile:</b> |  |
| <b>Any other siblings within Oasis Academy:</b> | <b>Y/N</b> Name/s: |                |  |

### SESSIONS REQUIRED

|  | 7:30-8:00 | 8:00-8:45 | AM<br>(8:45-11:45) | Lunch<br>(11:45-12:15) | PM<br>(12:15 – 3:15) | 3:15-4:00 | 4:00-5:00 | 5:00-6:00 |
|--|-----------|-----------|--------------------|------------------------|----------------------|-----------|-----------|-----------|
| <b>Cost per session after funded hours</b> | £2.10     | £3.20     | £12.75             | £2.10                  | £12.75               | £3.20     | £4.25     | £4.25     |
| <b>Monday</b>                              |           |           |                    |                        |                      |           |           |           |
| <b>Tuesday</b>                             |           |           |                    |                        |                      |           |           |           |
| <b>Wednesday</b>                           |           |           |                    |                        |                      |           |           |           |
| <b>Thursday</b>                            |           |           |                    |                        |                      |           |           |           |
| <b>Friday</b>                              |           |           |                    |                        |                      |           |           |           |
| <b>Term time only place</b>                |           |           |                    |                        |                      |           |           |           |
| <b>All year-round place</b>                |           |           |                    |                        |                      |           |           |           |

*\*Sessions are only payable when maximum entitlement of funded hours have exceeded.*

**\*\* Please provide evidence of 2 year old funding (if applicable) and birth certificate**

|                                   |  |
|-----------------------------------|--|
| <b>Signature of parent/carer:</b> |  |
| <b>Date:</b>                      |  |

### FOR OFFICE USE ONLY

|                                    |  |
|------------------------------------|--|
| <b>Confirmation of Eligibility</b> |  |
| <b>Copy of Birth Certificate</b>   |  |
| <b>WCC Parent Declaration Form</b> |  |
| <b>Offered Place</b>               |  |

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