

Randolph Beresford Early Years Centre

2 yr Funded Application Form

CHILDREN'S DETAILS

Childs Full Name	Date of Birth	Male / Female	Additional Support Needs/Registered Disabled

PARENT/CARER/CHILDMINDER DETAILS

Full Name	Address	Date of birth	Contact Number	Relationship

ETHNICITY (Please select from list):	WHITE	British	
		Irish	
		Traveller of Irish Heritage	
		White Eastern European	
		White Western European	
		Gypsy/Roma	
		White Other	
	BLACK OR BLACK BRITISH	Caribbean	
		African	
		Any Other Black Background	
	MIXED/DUAL BACKGROUND	White and Black Caribbean	
		White and Black African	
		White and Asian	
		Any Other Mixed Background	
	ASIAN OR ASIAN BRITISH	Indian	
		Pakistani	
		Bangladeshi	
		Any Other Asian Background	
	CHINESE	Chinese	
	ANY OTHER ETHNIC GROUP	Afghan	
		Arab Other	
		Egyptian	
		Iranian	
	Iraqi		
	Kurdish		
	Lebanese		
	Moroccan		
	Any Other Ethnic Group		
REFUSED	I do not want ethnicity recorded		
First Language:		Do you need an interpreter?	

I declare that all information I have provided to the nursery is true to my knowledge. I understand that the information I have provided will be kept on file for statistical monitoring and evaluation purposes. Data relating to children may be used to track and monitor their Early Years Foundation Stage Profiles. I understand that the nursery may contact me, and will send me information on services and events. Any information regarding you and your family is kept confidential and will not be passed to organisations outside of our nursery partners without your consent, unless it is of a Child Protection nature, in which case information will be shared with appropriate agencies. The nursery undertakes to keep all information provided in a secure location.

Print Name _____

Signed _____ (Parent/Carer)

Date _____