



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



St Mary's R.C. Primary School, Battersea

7 St Joseph's Street, SW8 4EN

Tel: (020) 7622 5640

Email: admin@st-marys-pri.wandsworth.sch.uk

www.stmarysschoolbattersea.co.uk

Executive Headteacher Mr Jared Brading

Associate Head Mrs Claire Mitchell

Welcome to St Mary's 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

Child's Name: (underline last name) _____

Gender: _____ **Date of Birth:** _____

Check List:

- Child's Birth Certificate: []
- First Proof of Address*: []
- Second Proof of Address*: []
- Baptism Certificate: []
- Dedication Letter or Other: []
- Priest Letter (if applicable)..... []
- Currently on roll in our Nursery: []
- Sibling: []

OFFICE USE ONLY:

Date Application Received:

Nursery/Reception/In-year Application:

Criteria Number:

Year / Class:

Allergies:

SEND:

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: _____

* Proof of address must be dated within the previous three months

BASIC DETAILS

Name of Child:

Date of Birth:

Certificate Seen: YES / NO

Home Address:

.....

Post Code:

Mother's Full Name:

Mother's Address (if different to above):

.....

Mother's Phone Number:

Mother's Email Address:

Mother's Country of Origin:

Father's Full Name:

Father's Address (if different to above):

.....

Father's Phone Number:

Father's Email Address:

Father's Country of Origin:

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

Address:

Phone Number:

Email Address:

Brothers or Sisters attending St Mary's RC Primary School:

Name: D.O.B:

Name: D.O.B:

Brothers or Sisters attending Other Schools:

DIETARY DETAILS

Has your child any known allergies?

No Fish No Pork No Eggs No milk No Dairy No Nuts Vegetarian

Other.....

MEDICAL DETAILS

Does your child have an Epi-Pen? Yes No

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:

Any other information you would like to make us aware of: (cultural, religious, medical, behavioural, etc.)

.....
.....
.....
.....
.....
.....

CHILD'S ETHNICITY AND LANGUAGES

Child's Ethnicity

↓

Please tick appropriate box:

Languages exposed to (heard or spoken at home)

↓

Please tick appropriate box/es:

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		Guajarati		Urhobo	
Parent preferred not to say		Hindi		Yoruba / Owobo / Yorwoa	
Turkish		Ibo / Igbo			
White - British		Irish			
White - Irish		Italian			
White & Asian		Kinyarwanda / Ruanda			
White & Black African		Refused			
White & Black Caribbean					
White Eastern Europe					
White Other					
White Western Europe					

First Language: _____

National Identity: _____

Country of Birth (e.g., United Kingdom, France) _____

RELIGIOUS DETAILS

Child's Religion:

Date of Baptism:

Place of Baptism:

Certificate Seen: YES / NO

Mother's Religion:

Church Mother Attends:

Father's Religion:

Church Father 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.

How will your child travel to school?

Please Circle: Bus Train Walk Car Bike Scooter

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 other than child's Mother or Father.

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:

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.)



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APPLICATION FOR NURSERY ADMISSION 2024 - 2025

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 St Mary's RC 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	
30 hours	(5 full days 9.00-3.30) I will be entitled to 30 hours of free childcare.	Insert code:
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 £100 per week.	

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 2024 - 2025	Term Dates	Top Up Charge 2024 - 2025	To Be Paid By
Autumn 1	02/09/24 – 25/10/24 (7 weeks and 4 days)	£780.00	02/09/24
Autumn 2	05/11/24 – 20/12/24 (6 weeks and 4 days)	£680.00	05/11/24
Spring 1	06/01/25 – 14/02/25 (6 weeks)	£600.00	06/01/25
Spring 2	24/02/25 – 04/04/25 (6 weeks)	£600.00	24/02/25
Summer 1	22/04/25 – 23/05/25 (4 weeks and 4 days)	£460.00	22/04/25
Summer 2	03/06/25 – 22/07/25 (7 weeks and 1 day)	£720.00	03/06/25

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.

I/We confirm that I will give the school a minimum of a one terms notice if I decide to withdraw my child's place from the Nursery. (Refunds will only apply with minimum of a one terms notice received in writing)

Signature Parent 1:

Date:

Signature Parent 2:

Date:

Home School Agreement



The Sacred Heart and St Mary's Federation will endeavour:

- To share relevant information relating to pupils regarding behaviour, attendance, parental attitudes and support.
- To share best practice.
- To cooperate and liaise with a range of internal and external agencies – family workers, learning mentors, education welfare officers, educational psychologists, learning support and behaviour support.
- To ensure a smooth transition between settings and classes.
- To make best use of local resources, both human and physical, and share knowledge of these.
- To ensure that Family Learning will be open to all, and available across the schools in the federation.

As a federation of schools:

- We promote equality of opportunity.
- In accordance with LA guidelines, we will not tolerate any aggressive behaviour towards staff/families or any other visitors to our schools.



Why do we need a home school agreement?

- So that we know what to expect of each other.
- It acts as a reminder of our joint responsibilities towards each other.
- It acts as a clear starting point for new pupils, their parents and the school staff.
- It underpins the schools' clearly stated aims.
- It is to the benefit of pupils, parents and staff.

The Federation of Sacred Heart & St Mary's Catholic Primary Schools (Battersea)



Home School Agreement

Name:

Class:

Home School Agreement

The school will aim to:

- Provide its pupils with a Catholic Education in accordance with the Mission Statement and as detailed in the School Prospectus.
- Set high standards for work and behaviour in order that each child may attain his/her potential.
- Inform parents of their child's progress through consultation evenings, parent teacher meetings and annual written reports.
- Advise parents of any concerns the school may have with regard to their child's social development, behavioural or academic progress.
- Keep parents informed about general school matters through newsletters, half termly parent information sheets, the web- site, social media and special notices.
- Provide support to enable a child to reach their full potential.
- Provide extracurricular activities that stimulate the children's interests.
- Develop and extend further links with the wider community.
- Provide a well-resourced and attractive environment that supports the children in their learning.

Signed _____

Date _____

As Parents / Guardians we will:

- Support the school's Catholic mission and aims and encourage my child's active participation in the religious life of the school.
- Ensure that my child attends school on time, refreshed and ready to work.
- Telephone the school prior to, or on, the morning of any absence and, on his/her return, provide a written note explaining the reason for the absence to his/her teacher.
- Inform the school about any concerns or problems which might affect my child's work or behavior.
- Support the school's efforts to maintain high standards of work and behavior.
- Ensure that my child wears the school uniform as detailed in the prospectus.
- Do my best to attend consultation evenings, parent teacher meetings and other meetings that may be held to discuss my child's progress.
- Support my child with his/her homework, reading and spellings, ensuring that it is completed and returned to school on time.
- Read the newsletters and regularly access the website for up to date information.
- Support the school's efforts to maintain high standards.

Signed _____

Date _____

I, the pupil, will try to:

- Be polite and helpful to others.
- Show respect to other children and the adults who care for me.
- Follow the school rules which are there to keep me safe and happy.
- Respect the views and opinions of others.
- Bring my PE kit, and all the equipment I need, every day.
- Read every night and check that my reading record is signed and returned to school every day.
- Wear the school uniform and be tidy in my appearance.
- Do all my class work and homework as well as I can.
- Treat the school buildings, furniture, books, and equipment with care and respect.
- Keep the school free from litter.
- Walk calmly around the building.
- Be proud of being part of our schools' communities.

Signed _____

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)

<p>Child's Forename: _____ Surname: _____</p> <p>Religion/Denomination: (e.g. Roman Catholic) _____ Boy <input type="checkbox"/> Girl <input type="checkbox"/></p> <p>Date and Place of Baptism (if applicable): _____*</p> <p>Parents' Names: (Mother) _____ (Father) _____</p> <p>Parents' Religions / Denominations: _____</p> <p>Home Address: _____</p> <p>Postcode: _____</p> <p>Contact Numbers: _____</p>
<p>If Catholic, indicate which Mass you normally attend:</p> <p>Saturday at: _____ time. Sunday at: _____ time.</p> <p>Parish in which you live: (e.g. Sacred Heart, St Vincent de Paul) _____</p> <p>Usual place of worship (if different): _____</p> <p>How long have you worshipped there? _____ Years.</p> <p>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</p>
<p>I confirm that the information we have given on this form is accurate and truthful:</p> <p>Signed: _____ Parent/Carer Date: _____</p>

* **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

Are the parents known to you?

Yes No

Child

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.

Free School Meals and Pupil Premium Application Form

Dear Parent/Carer

We want to make sure that we are providing your child with the best education and support we can. Healthy school food has obvious health benefits and can help pupils establish healthy habits for life. Healthy school food can also help to improve pupils' readiness to learn.

We understand that we have all gone through challenging times and personal circumstances may have changed for you as a family throughout the pandemic.

Families who receive certain benefits may be eligible for free school meals. Your child is eligible for free school meals if you are in receipt of one of the following benefits:

- * Universal Credit with an annual net earned income of no more than £7,400;
- * Income Support;
- * Income-based Jobseeker's Allowance;
- * Income-related Employment and Support Allowance;
- * Support under Part 6 of the Immigration and Asylum Act 1999;
- * The guarantee element of Pension Credit;
- * Working Tax Credit run-on (paid for the four weeks after you stop qualifying for Working Tax Credit);
- * Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190.

Registering for free meals could also raise an extra £1,345 for your child's primary school to fund valuable support like extra tuition, additional teaching staff or after school activities.

This additional money is available from central government for every child whose parent is receiving one of the benefits listed above.

To check if your child is eligible, we need information about you. Please complete this form.

Parent/Carer

Parents' Full Name: _____
Parent D.O.B.: _____
Parent National Insurance Number: _____
(OFFICE USE ONLY) Eligible: Yes <input type="checkbox"/> No <input type="checkbox"/>

Child details

Child's Full Name: _____
Child's D.O.B.: _____
(OFFICE USE ONLY) Eligible: Yes <input type="checkbox"/> No <input type="checkbox"/>

DECLARATION: _____ **Date:** _____

By completing this form, I agree the information I have given is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for free school meals.