



Contact us: Tel - 0207 253 8144

Email - admin@moreland.islington.sch.uk Website - www.moreland-islington.co.uk

Moreland Primary School

Application for admission to Nursery/Primary Class

PLACE APPLYING FOR _____

*Two Year Old Code _____ *30 Hour Code _____

*If applicable

Childs Surname _____ First Name _____

Date of Birth _____ Male/Female _____

Name of Parent/Carer _____

Address _____

Contact Number _____ Borough of Residence _____

Brother or sister already attending YES/NO

Names _____

Current early years/nursery/school provision _____

Medical/Social/SEN

If your child has medical/social or special educational needs please tick the box and include a copy of a report from an appropriate professional. It would be helpful if you could also give a brief outline below.

Parents reason for wanting to change schools _____

Parent/Carers Signature _____ Date _____

We will pass this on to our admissions department and inform you as soon as possible if there are any places available. Your child/children will go on our waiting list if we are full.

Please see our admissions policy on our website for more information.

Top copy for school /2nd copy to parent