



NURSERY REQUEST FOR CHANGE OF SESSIONS

Surname	
Forename(s)	

Please complete the table below indicating the sessions you wish to continue with and the additional/changed sessions. Please return the form as soon as possible and we will check availability.

Please indicate the date you would like this change to start here:

	Extended Provision 7.30am–9.00am 1½ hours	Morning Session 9.00am-12.00pm 3 hours	Lunch 12.00pm-12.30pm ½ hour	Afternoon Session 12.30pm-3.30pm 3 hours
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

If your sessions are changing due to additional funding i.e. 30 funded hours please add the information below.

Parent/Carer/Guardian with legal responsibility		
If entitled to 30 hours funding please complete the following information:	11 digit ref number (DERN)	Parent NI number(s)
If entitled to Tax-Free Childcare please complete the following:	Unique Reference number	
I confirm that the information I have provided above is accurate and true and I agree to the provider claiming free entitlement funding as agreed on behalf of my child. I also agree that the information provided can be shared with the local authority and Department for Education. I understand that if I have given false information on this form I may be asked to reimburse the provider.		
Signed		
Print name		
Date		

I, being a parent/guardian/person with parental responsibility for the child named understand that the school collects and uses certain types of personal information about pupils. The school is required by law to comply with statutory obligations related to education and associated functions and may be shared with other agencies for the prevention and detection of fraud and the protection of children. Personal information is dealt with properly and securely and in line with the General Data Protection Regulation (GDPR) and other related legislation. For further information, please see the Fair Processing Notice (Privacy Notice) which can be found on our website.