

**Section C  
Confirmation**

12 I confirm that the information I have given in this form is true and that any documents I enclose are genuine. I understand that the Local Authority will not correspond with or discuss this application with anyone other than me.

Your signature:
Full name:
Date:

If you provide false information, we may withdraw any place we offer to you.

We will send you an acknowledgment letter within 3 working days. If you do not receive it please contact us immediately. Please follow the instructions on the guidance notes for returning this form.

**Data Protection**

We will hold the information you provide on computer. Under the Data Protection Act 1988 you have the right to check the information we hold. If you want to do this, please contact Pupil Placement.

West Lothian Council collects and uses personal information about staff, pupils, parents or carers and other individuals who come into contact with their schools. This information is gathered in order to enable it to provide education and other associated functions. West Lothian Council may share your data with external partners for the purposes of education and the health & well-being of pupils, for example NHS Lothian. In addition, there may be a legal requirement to collect and use information to ensure that West Lothian Council complies with its statutory obligations.

For establishment or office use only

July 2014

**a Application form**

Received	Date	Initials	Copy record	Date
Establishment			Date copy sent to Pupil Placement	
Pupil Placement			Date copy sent to establishment	
			Date copy sent to ALN	

**c Certificates**

	Establishment		Pupil Placement		Date certificate returned to parent or guardian
	Date certificate seen	Initials	Date certificate seen	Initials	
Birth					
Eligibility					

TA/A1



**West Lothian  
Council**

**Pupil Placement Section**  
Phone: 01506 280000  
E-mail: pupilplacement@westlothian.gov.uk

West Lothian Civic Centre  
Howden South Road  
Livingston  
West Lothian  
EH54 6FF

Please write your answers in **BLOCK CAPITALS** using black pen.

**Application for a Place in Pre-School Provision – 2 YEAR OLD**

**Section A  
Personal information**

Reference:

**1 Child's details**

Last name	First name	Middle	
Address and postcode		Date of birth	
		Male	Female
		(Please tick as appropriate)	
If the child is a twin/triplet etc. please indicate by writing the appropriate term			

**2 Your contact details**

Home phone number	Mobile phone number
E-mail address	

**3 Looked after status**

Is the child looked after at home as a result of a children's hearing or court decision? Yes  No

Is the child looked after away from home as a result of a children's hearing or court decision? Yes  No

If so, what is your relationship with the child (i.e. parent, foster carer, kinship carer, other?) \_\_\_\_\_

**4 Social Work Involvement**

Does the child have an allocated Social Worker? Yes  No

**5 Adults the child lives with**

Last name	First name	Relationship to the child	Phone number

**6 Other children in the household**

Are there other children under 19 years old who live with the child?

Yes  No

If 'Yes' please fill in the following table for **each** other child.

	Last name	First name	Date of birth	Sex	School they are already at (if any)	Year group
1						
2						
3						
4						
5						
6						

**7 Home language**

What language do you normally speak at home?

\_\_\_\_\_

**9 Other nurseries, playgroups and so on your child has been to**

In the table below, please give details of any other type of pre-school your child goes to or has gone to.

Pre-school	Name of establishment or person	Date from:	Date to:	Hours a day
Private nursery				
Other (i.e. childminder, playgroup)				

**Section B  
Application details**

**9 Preferred pre-school placement**

Would you prefer a placement with a childminder, a council nursery or a playgroup? (Please rank choices 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup>)

Preferred Placement	Choice (Please rank choices 1 <sup>st</sup> , 2 <sup>nd</sup> and 3 <sup>rd</sup> )
Childminder	
Council Nursery	
Playgroup	

**10 Preferred location of pre-school placement**

Which areas would you consider for your pre-school placement? (i.e. Broxburn, Winchburgh, South Livingston)

\_\_\_\_\_

**11. Other information**

Give below any other information you want us to consider.

Please also give details of any additional support needs your child has.

If necessary, attach an extra sheet. Remember to put your child's name and date of birth on any additional sheets you attach.

\_\_\_\_\_

**11 Proof of eligibility**

You must provide a copy of your child's Birth Certificate and proof of eligibility for a qualifying benefit. Please tell us what documents you are sending.

\_\_\_\_\_