



**Part 1:** To be completed by the parent/carer of the child concerned.

Forename of child:		Surname of child:		DOB:
Address:				
Post code:				
Parent title:	Parent forename:	Parent surname:	Telephone No:	
Name of primary school where your child will probably enrol for P1:				
Current nursery:			Previous nursery:	
Date started:			Date started:	
Why do you think your child would benefit from early entry to school?				

Parent signature: ..... Date: .....

Headteacher/Manager signature: ..... Date: .....

- ❖ Please ask the Headteacher/Manager of your child's nursery provision to return this form to **ASL Office**, Sealock House, 2 Inchyra Road, Grangemouth FK3 9XB, together with Part 2 which is completed by the Nursery.
- ❖ The application will be considered by Children's Services, and you will be advised if early entry to school, for your child is agreed or not, by the end of March.



**Part 2:** To be completed by the Headteacher/Manager for the child concerned

Name of child:	DOB:
Name of nursery/pre-school provision:	

Please comment on the following with reference to the key aspects and attach any other appropriate supporting information.

<b>1. Approach and attitude to learning</b>	
<b>2. Ability to communicate own needs, feelings and ideas</b>	
<b>3. Levels of independence and self help</b>	
<b>4. Emotional and personal development, including confidence and self-esteem</b>	
<b>5. Relationships and friendships with other children and adults</b>	

Has the information on this form been shared with the parent(s) of the child? YES / NO

Has copy of Part 1 and Part 2 been given to the parent? YES / NO

Headteacher / Manager signature: ..... Date: .....

Please return completed Part 1 and Part 2 to **ASL Office**, Sealock House, 2 Inchyra Road, Grangemouth FK3 9XB.