



**PLEASE READ THE 'INFORMATION FOR UNIVERSITY STUDENTS' SHEET BEFORE COMPLETING THIS FORM**

<b>General Details</b>		USN (OFFICE USE)											
Surname		First Name and Title				Date of Birth							
College		Nationality											
Home Telephone		Mobile telephone				Email address							
Child/Children's Surname (if different from above)													
Address (Cambridge address. If not known, write permanent home address)													
<b>Student Details</b>													
Type of student (please tick boxes that apply)		Undergraduate <input type="checkbox"/>		PGCE <input type="checkbox"/>		Graduate Student <input type="checkbox"/>							
		Home Student <input type="checkbox"/>		Overseas or EU Student <input type="checkbox"/>		Full-Time <input type="checkbox"/>		Part-Time <input type="checkbox"/>					
Type of course (e.g. BA, MPhil, PhD)			Subject										
Date course started /due to start (month/year)			Year of study (please circle)		1	2	3	4	4+				
Is your partner a student?		Yes <input type="checkbox"/>		If Yes, please give their full name, institution and College (if applicable)									
		No <input type="checkbox"/>											
		Full Time <input type="checkbox"/>		Part-Time <input type="checkbox"/>									
Does your partner work for the University, Cambridge Assessment or a College Teaching Officer?		Yes <input type="checkbox"/>		If Yes, please give their full name, position and Department									
		No <input type="checkbox"/>											
Does your partner's employer/place of study offer childcare provision, e.g. workplace nursery, nursery vouchers, holiday playscheme? Please give details													
If your partner's employer/place of study has childcare provision, please explain why you are choosing to apply through the University's scheme													
<b>Personal Details</b>													
Are you resuming studies following a period of maternity leave?								Yes <input type="checkbox"/>		No <input type="checkbox"/>			
I am (please circle)      Single      Married      Living with partner				Are you registered disabled? (please tick)		Yes <input type="checkbox"/>		No <input type="checkbox"/>					
Are any of your children who require a nursery place registered disabled or do they have additional needs?		Yes <input type="checkbox"/>		No <input type="checkbox"/>		If yes, do you have a formal statement?							
						*Yes <input type="checkbox"/>		No <input type="checkbox"/>					
* If yes, please give details on a separate sheet and attach to this form. Please tick box if separate sheet is attached. <input type="checkbox"/>													
<b>Your offer may be at risk if you do not declare any additional needs your child may have.</b>													
You may be eligible for assistance with nursery fees. See the 'Information for University Students' sheet for more details. Your place on the waiting list will NOT be affected if you apply for funding.													

Details of Children								
List details of all your children, even those who do not require a place at the nursery								
Name*	Age	Date of Birth	Sex M / F	has a place at one of these nurseries				
List the name(s) of the child/children for whom a place at the nursery is requested								
Date from which place(s) is required	Day	Month	Year	Do you require a Full-Time or Part-Time place(s) (please tick)	FT	PT		
For Part-Time place(s), please indicate the booking pattern ideally required by ticking the appropriate box.  <i>Please note:</i> it is not always possible to meet particular part-time booking requirements. Nursery management may need to match the booking requested with another applicant. Part-time bookings will be considered in the interests of the child. The nursery will negotiate such details directly with the applicant.  Please tick box if you are able to be flexible with booking. <input type="checkbox"/>				Mon	Tues	Wed	Thur	Fri
Expected end date of nursery place (date you will no longer be a student actively pursuing a course of study and resident in Cambridge)				AM				
				PM				
				Day	Month	Year		
<b>Failure to respond to an offer within 7 working days:</b> <i>If you are made an offer and fail to respond within 7 working days, it will be considered that you no longer want the place and you will be withdrawn from the waiting list.</i>								
<b>Payment</b>								
You are required to make a £10.00 (incl. VAT) payment when applying for a nursery place. This must be paid using eSales at the following link: <a href="http://onlinesales.admin.cam.ac.uk/browse/extra_info.asp?compid=1&amp;modid=1&amp;catid=114&amp;prodvarid=184">http://onlinesales.admin.cam.ac.uk/browse/extra_info.asp?compid=1&amp;modid=1&amp;catid=114&amp;prodvarid=184</a>								
(1) I declare that the information given on this form is full and accurate; (2) I confirm that I am a registered student of the University of Cambridge OR I confirm that I am a prospective student expected to come into residence on the date indicated in section 2; (3) I undertake to inform the University's Childcare Office if my contact details or eligibility for a nursery place change; (4) if I accept a University nursery place I agree to withdraw my child on the date I cease to be a resident student actively pursuing a course of study in the University, or if otherwise my eligibility for a place ceases; and (5) I have made a payment via eSales for this application								
Signed _____				Date _____				
Name (please print) _____								
<b>Tutor/College section:</b> Please corroborate all details supplied by the student above, including any special circumstances, and provide comments below. Please also see the priority access criteria explained on the Information Sheet for personal circumstances that will be considered. For students yet to begin studying, please give the date they are expected to come into residence.								
Comments								
Continue on extra sheet if necessary. Please tick box if a separate sheet is attached. <input type="checkbox"/>								
I confirm that the information supplied on this form is full and accurate, to the best of my knowledge.								
Signed _____				Date _____				
Name (please print) _____				Position _____				
Return forms: Secretary, Joint Committee on Childcare for Students, Childcare Office, 21 Trumpington Street, Cambridge, CB2 1QA								
05/16								

### Data protection

The University of Cambridge is a data controller as defined by the Data Protection Act 1998. The data provided on this form will be treated in strictest confidence and will only be disclosed to staff of the University, your college and staff of Childbase Partnership. It will be used only for the purpose of nursery provision and will not be disclosed to others.