**Please read the ‘Staff Information Sheet’ before completing this form as failure to do so may impact on your point score.**

 **Information regarding our nurseries and the employee Salary Exchange Scheme can be found on the Childcare Office web pages** [**www.childcare.admin.cam.ac.uk**](http://www.childcare.admin.cam.ac.uk)

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| **Please indicate, stating order of preference (1st,2nd or 3rd), the nursery or nurseries at which you would be willing to accept a place:** **Edwinstowe Close □ West Cambridge □ Eddington □** |

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| **A Applicant’s** **Det Details: Title: \_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |

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| **Applicant’s** **Addresses: Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |

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| **Contact Telephone****Numbers: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **Email Personal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Addresses:**  |

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| **If you have not yet taken up an appointment in the University, please attach copies of your offer letter, your letter of appointment or contract, as appropriate, and indicate the date on which employment will commence.****Start Date of Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payroll Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **If you intend to return to work at the University following maternity, adoption or shared parental leave, please tick the relevant box:****Maternity Leave: □ Adoption Leave: □ Shared Parental Leave: □****Start date of leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End date of leave: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **I am ( please tick which is applicable)****Single □ Married □ Divorced/Separated □ Living with partner □ Widow/Widower □****If applicable, please indicate if your partner works/studies at one of the following:****Works for: Cambridge University □ Cambridge Assessment □ College CTO □ Studies at Cambridge University □**

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| **Name**  | **Department / College** | **Payroll Number / Student Number** |
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| **Details of the child or children for whom a nursery place is requested:**

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| --- | --- | --- | --- |
| **Full Name** | **Date of Birth** | **Gender M/F** | **Requested Start Date** |
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**Do any of your children who require a nursery place have any additional needs? Yes □ No □****If Yes, do they have a formal Statement? Yes □ No □****If applicable, please enclose a copy of the Statement with this application.** **Any offer of a nursery place may be at risk if you do not declare any additional needs your child has.** **List any special circumstances you would like to have taken into account on a separate sheet of paper & attach it to this form.****Details of any siblings attending a University nursery at the requested start date noted above:**

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| **Full Name** | **Date of Birth** |
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**Requested booking pattern:****Which type of place do you require? Full-Time □ Part-Time □ Are you able to be flexible with your booking choice? Yes □ No □****Part time bookings are subject to the following restrictions: 1,2,3 or 4 full days Mornings only (all 5 days) or afternoons only (all 5 days)****Please indicate in the box below your choices:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** |  **Wednesday** | **Thursday** | **Friday** |
| **am** |  |  |  |  |  |
| **pm** |  |  |  |  |  |

Do you have any information to add relating to your requested booking pattern?

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**You are required to make a £10.00 (incl. VAT) payment when applying for a nursery place. This should be paid using eSales at the following link:**[**http://onlinesales.admin.cam.ac.uk/browse/extra\_info.asp?compid=1&modid=1&catid=114&prodvarid=184**](http://onlinesales.admin.cam.ac.uk/browse/extra_info.asp?compid=1&modid=1&catid=114&prodvarid=184)**Nursery Offer:**The nursery will contact you directly if they have a place.The offer of a nursery place can be turned down once, but should a second offer be refused, you will be taken off the waiting list. You will only be able to re-join the waiting list after 3 months and will have to start the process from the beginning.If you are offered a place and you fail to respond to the nursery within 7 working days, it will be considered that a place is no longer required and your application will be removed from the waiting list.To assist in the offer process, please be sure to inform the Childcare Office childcareservices@admin.cam.ac.uk of any changes to your contact details. |

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| **Signature:**I confirm that (a) the above information is full and correct; (b) I have a formal Contract of Employment with the University and am listed on the monthly payroll; (c) I have made a payment via eSales for this application;  (d) I have read and I agree to the conditions detailed on the Staff Information Sheet;  (e) I will relinquish the University Nursery place(s) on the date when my employment with the University terminates.

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| **Please tick to give permission for the Childcare Office to update the University HR system, CHRIS, in the event that the home address and the telephone number you have provided on this form does not match the details the University holds for you.**  □ |

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| **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

 **Please return form to**: Staff Childcare Committee, Childcare Office, 21, Trumpington Street, Cambridge, CB2 1QA **or by email to:**  childcareservices@admin.cam.ac.uk All forms must be signed.

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| **Data Protection**The personal information about yourself and your child that you provide on this form will be used for the contractual purpose of nursery provision as described on our website <http://www.childcare.admin.cam.ac.uk/nurseries>. It will be treated in strictest confidence and will only be disclosed to staff of the University , Childbase Partnership and the management of Eddington TBC. For more information about how we handle your personal information, and your rights under data protection legislation, please see <https://www.information-compliance.admin.cam.ac.uk/data-protection/general-data>.  |

 03/18 |

For Office Use Only

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| --- | --- | --- | --- |
| Date Received | Payment Received | Date Processed | Confirmation Sent |
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