

**APPLICATION FORM FOR RADCLIFFE DEPARTMENT OF MEDICINE (RDM)
SPONSORED NURSERY PLACES**

Introduction

This application form should be completed by staff and students who wish to apply for an RDM sponsored nursery place. For more information about the scheme, details of eligibility criteria and terms and conditions, please refer to the 'Policy on the Allocation of Radcliffe Department of Medicine (RDM) Sponsored Nursery Places' <http://www.rdm.ox.ac.uk/family-friendly-benefits>

Completed and signed application forms should be sent by post to Felicity Green, RDM Strategic Administrator, Level 6 West Wing, John Radcliffe Hospital, Oxford OX3 9DU or by email to felicity.green@rdm.ox.ac.uk. Your application form will be evaluated by the RDM Sponsored Nursery Places Panel and you will be notified of the outcome.

Please note that your application form will be held on file until you inform RDM that you no longer require a sponsored nursery place.

Personal Details

Name:
Sex:

Employment Details (Please delete as appropriate)

Are you an employee of RDM or have you signed a contract to take up employment with the department?	Yes/ No
Job title:	
Start date:	
Are you in a joint-appointment between RDM and another Department or College within the University?	Yes/ No
If yes, please specify which other Department or College:	
Within which RDM Division are you based or will you be based?	
<ul style="list-style-type: none"> • Division of Cardiovascular Medicine • Investigative Medicine Division • Nuffield Division of Clinical Laboratory Sciences • Oxford Centre for Diabetes, Endocrinology & Metabolism • Other (RDM Admin, WIMM Admin/Facilities): 	

Eligibility (Please delete as appropriate)

Have you already applied to join the Childcare Services waiting list for University nursery provision? If yes, please provide confirmation (e.g response to on-line application) from Childcare Services	Yes/ No
How long have you been on the Childcare Services waiting list for University nursery provision?	
Please indicate if you already qualify for priority status through the established criteria below:	
<ul style="list-style-type: none"> • Do you, your partner or your child have a disability? • Are you a lone parent? • Is one or more of your child's sibling(s) already using University nursery provision? • Are you or your child's other parent a University of Oxford student? 	Yes/ No Yes/ No Yes/ No Yes/ No
Is the other parent of your child employed by the University of Oxford? If yes, please specify which Department or College:	Yes/ No

Other Factors (Please delete as appropriate)

Is your child born yet? <ul style="list-style-type: none"> • If yes, date of birth of child • If no, expected due date 	Yes/ No
If on parental leave, when is the planned date of return to work?	
When would a nursery place be required from?	
Would the required nursery place be full-time or part-time?	
If the child has already been born, what are the current and planned childcare arrangements? (e.g. has a private nursery place been secured?)	

Is the other parent of your child also an employee or student of RDM?	Yes/ No
Have you got other significant caring responsibilities at home (e.g. elderly relative)? If yes, please specify:	Yes/ No
Do you have any other personal circumstances which would make it extremely difficult for you to return to work in RDM without a nursery place for your child? If yes, please specify:	Yes/ No

Further Considerations (Please delete as appropriate)

Do you have extenuating circumstances which mean that you did not join the University's nursery waiting list earlier, and that consequently, your position on the University's nursery waiting list makes it unlikely that you will be able to return to, or take up, employment with RDM when the time comes? If yes, please specify:	Yes/ No
Has the other parent of your child got access to a workplace nursery scheme with their employer? Please provide details:	Yes/ No
Please describe the steps that you have taken to explore all alternative options for securing a sponsored or subsidised nursery place (such as assistance from the employer of the child's other parent):	

Please provide any additional information, which you believe should be considered while assessing your application for an RDM sponsored nursery place:

Declaration: I hereby declare that the information supplied in this application form is true and correct to the best of my knowledge on the date of signing.

Signed:

Date: