



Office Use Only
Admission Date:
Class:
Birth Cert?

S. Springett-McHugh
Executive Headteacher

ADMISSION FORM

Child's Details			
Last Name	Legal Last Name (if different)	Forename	Date of Birth
			Male / Female
Address		Home Telephone Number	
Parents'/Carers' Details			
Father's Name		Mother's Name	
Father's Address		Mother's Address	
Home Telephone Number:		Home Telephone Number:	
Mobile Number:		Mobile Number:	
Work Number:		Work Number:	
Email Address: Please print clearly		Email Address: Please print clearly	
Parental Responsibility	Yes/No	Parental Responsibility	Yes/No

Emergency Contact Details

We will always try the Parents/Carers Contact Details first
In the event of us not being able to speak to the people listed above, please supply us with the names & contact details of three alternative other contacts

	Name & Address	Relationship to Child	Contact Numbers
1 st Contact			Home: Mobile: Work:
2 nd Contact			Home: Mobile: Work:
3 rd Contact			Home: Mobile: Work:

Family Circumstances

If parents do not live together, who does the child live with?

Is there a custody or residency order in place? Custody Order
 Residency Order

Other Children in the Family

Name	Date of Birth	Current School
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

Medical Details – Vital Information

Name of Doctor:	Health Centre & Telephone No:
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Are there any important medical details which we should be made aware of, including any allergies? Yes / No

If yes, please give details:

Lunch Arrangements

All infant children at full time school are entitled to a free school meal. Alternatively, you can provide a packed lunch from home.

For those parents & carers who are entitled to certain benefits from the Department of Work & Pensions, please can you register on line to check your eligibility for your child to receive Pupil Premium funding:

<https://www.cloudforedu.org.uk/ofsm/sims>

This is a speedy, simple and confidential service. If the system shows your family are eligible, you will be issued with a reference number which you should show to our School Office Team. If you need any help or advice, please contact us.

Previous School/Nursery/Childcare Arrangements

Name & address of previous School/Nursery or details of childcare arrangements:

Does your child have special educational needs?

Yes / No

If yes, please give details:

Language & Religion

Place of birth:	First language:
Country of birth:	Language spoken at home:
Religion:	

Ethnic Origin

Please tick the relevant box

This information is required by the Local Education Authority and will remain confidential

Any other Asian background			Other White British		
Any other Black background			Pakistani		
Any other Mixed background			Roma		
Bangladeshi			Traveller of Irish Heritage		
Black Caribbean			White English		
Black Ghanian			White Irish		
Black Nigerian			White Scottish		
Black Sierra Leonian			White Welsh		
Black Somali			White & any Asian background		
Chinese			White & Black African		
Gypsy			White & Black Caribbean		
Gypsy/Roma			White & Indian		
Indian			White & Pakistani		
Italian			White, Eastern European		
Japanese			White, Other		
Other Black African					
Other Ethnic group					
Other Gypsy/Roma					

Signed _____

Relationship to child _____

Print name _____

Date _____