



Executive Headteacher
Mr S Springett-McHugh, BA (Hons)

Associate Headteacher
Mr S Weston, BSc (Hons)

Office Use Only

Admission Date:

Class:

Birth Cert?

ADMISSION FORM

PLEASE COMPLETE ALL SECTIONS OF THIS FORM

Child's Details

Last Name	Legal Last Name (if different)	Forename	Date of Birth
			Male / Female
Address		Home Telephone Number	

Parents'/Carers' Details

Parent/Carer 1 – Name:	Parent/Carer 1 – Name:
Relationship to Child:	Relationship to Child:
Address	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
3 rd Contact			Home: Mobile: Work:
4 th Contact			Home: Mobile: Work:
5 th 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.	_____	_____	_____

Medical Details – Vital Information

Name of Doctor:

Health Centre & Telephone No:

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 (in Years Reception (FS2), Year 1 and Year 2) are entitled to a free school meal (Universal Infant Free School Meal). Alternatively, you can provide a packed lunch from home.

(Nursery children are not entitled to receive Universal Free School Meals).

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 Ghanaian		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			

Eligibility Check to Claim Pupil Premium Funding/Free School meals

To enable us to claim all funding that we are entitled to from the Government, please can we ask you to provide the following details for us to be able to check eligibility for your child to receive free school meals and/or pupil premium funding - please note that the eligibility check is a confidential service.

Name of Parent/Carer _____

Relationship to Child _____

Parent/Carer Date of Birth _____

National Insurance Number _____

Signed _____

Relationship to child _____

Print name _____

Date _____