

RECEPTION YEAR GROUP ADMISSIONS 2019/20

If you are a resident of Bath and North East Somerset you can apply online by visiting our web site <u>Admissions to Schools</u>. Alternatively complete this form (one for each child) using a ball point pen and BLOCK CAPITALS. The closing date for all applications is 15th January 2019. You can apply for any school regardless of whether or not the school is located in or outside of Bath & North East Somerset.

If you live outside of Bath & North East Somerset <u>do not</u> **fill in this form.** Contact your home authority for an application form. You will be able to use that form to apply for schools in this authority.

All applicants for Bath and North East Somerset Schools should ensure that they have read the booklet 'A Primary School for your Child in Bath & North East Somerset 2019/20'.

SECTION 1 - Child Details You should enter your child's legal surname and first/middle name(s) as they appear on																						
SECTION 1 – Child Details You should enter your child's legal surname and first/middle name(s) as they appear on his/her birth certificate, unless the child's name has been legally changed																						
First Name																						
Middle Name(s)																						
Surname/Family Name																						
Date of Birth		_									·											
Gender	}	Day	у				Мо	ntn [J	Υ€	ear								
	Mal	le				Fer	nale]												
Home Address																						
											Postco	de										
For school admission	n p	urpose	es the	Loca	al Aut	hority	/ (L <i>A</i>	A) wi	l coi				d's l	nome	e a	ddre	ss t	o b	e the	е		
For school admission purposes the Local Authority (LA) will consider the child's home address to be the permanent address where he or she generally resides with their parent. Temporary addresses may not be used to obtain school places. If you/your child are moving from your present address please supply details of the new address above and supply the anticipated move date below. Give details of your present address in Section 4. You WILL need to provide documentary evidence of your new address. On time applicants moving house will be considered from their proposed new address in the first round of allocations providing they have been able to submit appropriate documentary evidence by no later than 30 January 2019. For further information please refer to the Admissions Booklet. Moving to new address on (Day Month Year) Is the child "looked after" by a Local Authority? (Sometimes referred to as "Yes" No "Yes																						
"being in care") A "Looked After Child authority. If you are a											-	ded w	ith a	ccor	nmo	odat	ion l	y th	at lo	cal		
If YES, which Local A	utho	rity?																				
Name of Social Work	er																					
Is the child a "Previously looked after child"? i.e. became subject to an adoption, care arrangement or special guardianship order immediately after being looked after																						
If YES, please state Guardianship order If your child is born] after	the 0	1 Apri	il 2015	and	you v	vish	to de	lay e	ntry	until	Care Septe							Spe			
(Please read the dela	yed,	deferre	ed and	d acce	lerate	d adm	nissio	ns p	olicy)	YE	s L	J										

Does the child have a Statement of Sp Education, Health and Care Plan?	pecial Educationa	l Needs or	YES 🗆	NO									
If YES, your application will be processed by the Special Educational Needs Team – see the booklet 'A Primary School for your Child' for further information													
SECTION 2- SCHOOL PREFERENCES													
Your preferred school(s) should be shown in the preference boxes below in priority order. The booklet gives a detailed explanation of the equal preference system. You do not have to show a second or third preference if you do not wish, although you are strongly recommended to do so. You can express a preference for any school, including Foundation, Voluntary Aided (VA) or Academy Schools, within any Local Authority (LA).													
Please consider your preferences carefully as, after the closing date, if you decide to change your school preference (or preference order) your original application will be withdrawn and your child will NOT be considered for a school place in the first round of allocations even if the original application was received before the closing date. (See booklet for further details)													
Completion of the boxes does not guarantee that a place can be offered to your child at one of these schools. Every effort will be made to offer you a school of your preference. However, if schools receive more applications than places available, the admissions criteria will be used to decide which children can be offered places. Please note that all preferences are considered equally and if your child qualifies for a place at more than one school you will be offered your highest preference school.													
When completing your preferences if there is more than one school with the same name please also include the area in which the school is situated e.g. St Mary's, Timsbury.													
My 1 st Preference school is:													
Postcode of School													
My 2 nd Preference school is:													
Postcode of School													
My 3 rd Preference school is:													
Postcode of School													
Please tick any of the following reasons for each preference.	·	` '	·	·	·								
You may give reasons for your school preferences including religious or philosophical ones which all admission authorities will have regard to but you should note that all allocations must be made in accordance with the published admissions criteria if a school is oversubscribed.													
Preferences		1st	2	2nd	3rd								
Older sibling in preferred school (see als below)	so sibling section												
Distance (home to preferred school)													
Medical Reasons													
Religion or Faith													
Other reasons (please specify what these reasons are)													

SIBLINGS (see booklet for definition of a sibling)																							
If, in September 2019, this child has an older brother or sister who will be in attendance at one of your preferred schools or at the paired junior school (see Admissions booklet for details of paired schools) please give the details below:																							
First Name																							
Middle Name(s)																							
Surname/Family Name																							
Date of Birth		<u> </u>	Day				N/I	onth						Υe	ar								
Gender	Ma						Month Female							16	ai								
Home Address	IVIA	ie .			<u> </u>	emale	nale																
Current School											Pos	stco	de										
Guirent Gonooi																							
SECTION 3 - VOLUNTARY AIDED DENOMINATIONAL and ACADEMY SCHOOLS If your preferences include Voluntary Aided (VA) or Academy schools you should read the school's admission criteria which are published in each LAs Primary guides as the criteria will be different from those used for Community and Voluntary Controlled schools. Details of any supporting evidence they may require will be given in their admissions criteria and this evidence should be sent to the school direct. As well as completing this application form certain VA or Academy Schools require you to complete a supplementary information form (SIF), copies of which are available from the schools direct. Please see their admissions criteria for details of which schools require a SIF.																							
If one or more of you useful to the schools	_		nside	ering y	-	plicati	ion uı	-	heir				criter	ia:	llowi	_		ation	may	be			
Denomination (pleatick appropriate box)	ise]													
Is your child baptised	l?		YES					NO	[
NB: If you have ans						_									-								
school direct							1																
Name of church wher	e yo	u cu	rrentl	ly wor	ship																		
Name of parish Pries	/min	iste	r																				
If you are applying for evidence they require			_												_								
of support from your	mini	ster	or pa	rish p	riest h	as bee	en ser	nt to t	he s	cho	ol dir	ect,	plea	se tic	k thi	s box							

SECTION 4 – APPLICANT	DETA	AILS	(deta	ils of	adul	t resp	onsib	le fo	r app	olyin	g fo	r the	sch	nool	plac	e fo	r the	e chi	ild)		
Title (Mr/Mrs/Ms/Miss)																					
Forename																					
Surname/Family Name																					
Address (if different in																					
Section 1. See notes and provide your current																					
address if you are in the process of moving)											Ро	stco	de								
Telephone No. (daytime)																					
Telephone No. (mobile)																					
Email address									1												1
Relationship to pupil	Motl	her		Fa	ther		Step Parent				So	ocial	Wor	ker]	Fost				
	Social Worker Other Relative Other Family Member Other																				
Do you have parental resp	onsik	bility	for t	his ch	ild?	Y	ΈS					NO									
UK Service Personnel. Are y the area. An official letter deci				-		-				-		-							-	-	-
SECTION 5 - DECLARATION	ON P	LEA	SE SI	IGN A	ND D	DATE	THIS F	ORN	и ве	LOV	V										
You should note that the of later date, it is established false information in order representation under the Fr	that t	the p	lace v a par	was o	ffered r sch	d on a	basis	of fa	alse	or m	isle	adin	g inf	orm	atior	ı. If	you	kno	wing	gly g	ive
If false information is provided received after the published the school was also offered will discount the sibling's c	l closi I a pla	ing c	date it on the	will t	hen b	e rega	arded	as a l	late a	appli	catio	on. I	f it is	s fou	ınd t	hat a	a sib	ling	curr	ently	y at
In fairness to all parents the Council reserves the right to require documentary evidence of the genuineness of the family address and, if this is not produced, the Council reserves the right to make its own enquiries with, for example, the Council Tax Offices and other authorities.																					
In the interest of your child other Local Authorities and					the i	nform	ation y	ou p	rovi	de o	n the	pre	fere	nce	form	ma	y be	shaı	red v	vith	the
General Data Protection The information that you give your child. The information application and if you are a area.	ve on may	this be s	form hared	will b I with	e use othe	r Cour	ncil De	partr	nent	s for	the	purp	ose	s of	verif	ying	the	accı	urac	y of	the
Name of Parent/Carer			Ir	nitials		S	Surnan	ne/Fa	mily	Nan	ne										
Mr/Mrs/Ms/Miss (delete as n	ecessa	ary)																			
Signature													ate								
Please return the form by 15 th Admissions & Transport Team,																	osta	I add	Iress	of:	The
envelope with this form. This	docu	If you require confirmation of your application being received and have sent your application by post, please include a stamped addressed envelope with this form. This document can be made available in a range of languages, large print, Braille, on tape, electronic and accessible formats. Please contact The Admissions & Transport Unit on 01225 394312 for further information													Braill						