

St Bernadette's Catholic Primary School
In-Year Application Form



REASON FOR TRANSFERRING SCHOOLS:

Please tick appropriate box(s)

- Moving to Lancashire from outside of the UK (Please state Country):
- Moving to Lancashire from another local authority (Please state Local Authority):
- Moving from one area of Lancashire to another (Please state area):
- School to School Transfer within the same authority:
- Leaving Private Education:
- Leaving Elective Home Education:
- Other (Please state):

PUPIL PERSONAL INFORMATION

LEGAL SURNAME:		PREFERRED SURNAME	
LEGAL FORENAME		PREFERRED FORENAME:	
MIDDLE NAME(S)		SCHOOL YEAR GROUP:	
GENDER:	Male / Female	DATE OF BIRTH:	___ / ___ / ___
HOME ADDRESS: including post code			

PARENT / GUARDIAN INFORMATION - IN PRIORITY ORDER

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS: including post code					
HOME TELEPHONE NUMBER:		MOBILE NUMBER			
WORK TELEPHONE NUMBER:		PLACE OF WORK			
E-MAIL ADDRESS:					
RELATIONSHIP TO CHILD					

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS: including post code					
HOME TELEPHONE NUMBER:		MOBILE NUMBER			
WORK TELEPHONE NUMBER:		PLACE OF WORK			
E-MAIL ADDRESS:					
RELATIONSHIP TO CHILD					

OTHER CONTACT INFORMATION – Attach an extra sheet if necessary

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS: including post code					
HOME TELEPHONE NUMBER:		MOBILE NUMBER			
WORK TELEPHONE NUMBER:		PLACE OF WORK			
E-MAIL ADDRESS:					
RELATIONSHIP TO CHILD					

MEDICAL INFORMATION – Attach an extra sheet if necessary

MEDICAL PRACTICE:	
DIETARY NEEDS/FOOD ALLERGIES	
MEDICAL CONDITION	
<i>Please supply any additional information that the school should know about:</i>	

DETAILS OF SIBLINGS WHO WILL BE ATTENDING THE SCHOOL NOW BEING APPLIED FOR.
(Siblings include brothers and sisters, stepchildren, half brothers and sisters, adopted and foster children living with the same family at the same address).

NAME(S)	DATE OF BIRTH	SCHOOL	MALE/FEMALE

PLEASE CIRCLE THE FOLLOWING CHOICES AS APPROPRIATE

RELIGION

- | | | | | |
|----------------------|----------------|-------------|-------------------|-------|
| Baptist | Buddhist | Christian | Church of England | Hindu |
| Jewish | Methodist | Muslim | Roman Catholic | Sikh |
| United Reform Church | Other Religion | No Religion | | |

EAL (English is a second language) YES / NO **FIRST LANGUAGE** _____

PREVIOUS SCHOOL INFORMATION – IF APPLICABLE

Previous School/Nursery/Playgroup			
From	/ /	To:	/ /

PREVIOUS EDUCATION/SUPPORT HISTORY (Please tick as appropriate)		YES	NO
Is this pupil in care (Looked After/Previously Looked After)? If yes, to which Local Authority			
Children's Services involvement? If yes, please provide social worker's name:			
Previously Permanently Excluded?			
Previous Exclusion Record?			
Are you a Crown Servant? If you are UK service personnel or other Crown Servants living abroad with your family please tick YES. You will need to provide an official MOD, FCO or GCHQ letter declaring your relocation date and address.			
Special Educational Needs Status (SEN)	Education Health and Care Plan (EHCP)		
	Under Formal Assessment		

ADDITIONAL INFORMATION ABOUT YOUR APPLICATION/SCHOOL PREFERENCES
Additional information to support your application may be provided. This can be medical, social and welfare information relating to the pupil and/or the family. Evidence from an appropriate professional (e.g. doctor, health visitor, social worker) can be attached. Please continue on a separate sheet if necessary.

<p>THIS INFORMATION WAS PROVIDED BY: _____ (please print)</p> <p>RELATIONSHIP TO THE CHILD: _____</p>

<p>Signature(s)</p> <p>I/We confirm that the information provided is accurate at the time of this application. I/We acknowledge that the admission authority and/or Local Authority have the right to verify the information given on this application. I/We acknowledge that the offer of a place will be based upon this application and that an offer may be withdrawn if subsequently it is found to have been made in relation to inaccurate or misleading information. I/we will provide evidence of the pupil's permanent address and date of birth prior to or after taking up a school place if requested. I/We give permission for the Pupil Access Team to contact the school where my child is currently attending to seek background information in respect of behaviour/attendance/the involvement of outside agencies.</p>	
Parent(s)/Guardian(s)	Date

For office use only

SIMS updated		Birth Certificate Seen	
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This information will be used on a computerised system. The school is registered under the Data Protection Act to keep such information. Pupil data will be used for statutory returns to the Local Authority and registered Government Agencies.

