

HEREFORDSHIRE COUNCIL – CHILDREN & YOUNG PEOPLE'S DIRECTORATE

APPLICATION FOR A PLACE AT A SCHOOL FOR SEPTEMBER 2010

Please read the attached notes and the Information for Parents Booklet before completing this form. Please ensure that you answer all questions and sign the declaration overleaf.

All applications should be returned to your child's primary school no later than 6th November 2009

If your child attends a school in another Local Authority or in an Independent School please return to the Pupil Admissions Office, Children & Young People's Directorate, Herefordshire Council, Blackfriars PO Box 185, Blackfriars Street, Hereford HR4 9ZR no later than 6th November 2009.

You can now apply on line at www.cs.herefordshire.gov.uk

| | | |
|--|---|-----------------------------------|
| 1. PUPILS DETAILS | | |
| Surname | Forename | Middle name(s) |
| Date of birth | Gender (please tick) Male <input type="checkbox"/> Female <input type="checkbox"/> | |
| Home Address (this must be the normal and genuine residence of the parent / carer who has care of the child, that is, the address at which the child resides) | | |
| Address details | | Post Code |
| Telephone Number | | Mobile Number |
| Present School child is attending | | Date child started at this school |
| 2. CHOSEN SCHOOL(s) please see overleaf if applying for a Voluntary Aided School (number 8) and (number 9) if applying for a school in another Local Authority. | | |
| 1 | | |
| 2 | | |
| 3 | | |
| 3. SIBLING(s) please give full names and date of birth of any brothers or sisters, who in September 2010 will still be attending one of the schools that you are now applying for. Sibling is defined on page 9 of the information for parents book. | | |
| Surname | Forename(s) | Date of Birth(s) |
| School sibling(s) currently attending | | |
| 4. LOOKED AFTER CHILDREN Is your child (or has your child ever been) in care / looked after by Herefordshire Council or by any other authority? (Please tick) yes <input type="checkbox"/> no <input type="checkbox"/> If yes please name the Social Worker and Local Authority | | |
| 5. SPECIAL EDUCATIONAL NEEDS Has your child a Statement of Special Educational Needs (please tick) <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 6. TRANSPORT Please refer to the Information for Parents Book Section 5 regarding transport entitlement | | |

7. APPLYING FOR A PLACE ON SOCIAL, MEDICAL OR COMPASSIONATE GROUNDS

Complete this section **ONLY** if you are applying for a place on social, medical or compassionate grounds. This applies to adopted children too.

(Note: the critical test applied is whether the school that is sought is the only one which can meet the individual pupils needs).

A request for a placement on medical, social or compassionate grounds **will not be considered** unless you attach supporting information, preferably from an independent source. (see section 4.1 of the Information for Parents Book)

What school(s) does this supporting information relate to?

Number of pages attached

8. APPLICATIONS TO VOLUNTARY AIDED SCHOOLS

Complete this section **ONLY** if you are applying for a place at a Voluntary Aided School.

If applying for a Church Place at Bishops of Hereford Bluecoat School you will need to contact your local priest or minister to request the additional form that is required in addition to this form (SA1).

If applying for a place at St Mary's RC you are required to contact the school requesting either the catholic form or non catholic form required in addition to this form (SA1).

These forms must be attached together when returned.

What school(s) are you applying for, which this relates to?

Have you attached an additional form from the school(s)?

Yes

No

Please state any other supporting information you have attached i.e Baptismal Certificate

9. APPLYING FOR A PLACE IN ANOTHER LOCAL AUTHORITY

If you are applying for an out of county school please complete this form, we will then pass the information onto the relevant authority. They will inform us if they can offer a place, and we will inform you on the **official offer date 1st March 2010** of the outcome.

10. NAME OF APPLICANT (details of person filling in this form required below)

Title Mr / Mrs / Miss / Ms / other

Name

Surname

Relationship to pupil *(please see below)

Do you have parental responsibility for this child (please tick)

Yes

No

*eg Mother, Father, Step-parent, Social Worker, Foster Parent, or other relative (please state)

11. THE DECLARATION

I declare that the information on this form is correct and that I have received the Information for Parents Book. And that I have read the conditions stated on the Important Notes (page enclosed with this form). I understand that a place maybe lawfully withdrawn if it is proved to have been offered on the basis of fraudulent or misleading application.

Signed Print Name.....Date.....