

PART 4 - PARENTS/CARERS

Mr/Mrs/Ms/Miss/Other (please specify) Full Name:

Date of Birth: Relationship to child: Parent Grandparent Other: (please specify)

Telephone numbers: Mobile: Home: Work:

E-mail address:

If living arrangements for your child are shared, please provide details of other parent/carer:

Name:

Address:

Tel No: Please give details of the arrangements and if there is a Court Order, you will need to provide a copy.

PART 5 - DECLARATION

The Authority reserves the right to verify the information given – any offer of a place will be on the basis that the information is accurate.

I/We have read the booklet "Admission to Blackpool Secondary Schools 2018" and certify that the information given on this form is correct.

Parent(s)/Carer(s):..... Date:.....

**PLEASE RETURN THIS COMPLETED FORM TO:
School Admissions Team, Children's Services, PO Box 4, Blackpool FY1 1NA**

TO BE RECEIVED BY 31st OCTOBER 2017

PLEASE NOTE, FORMS RECEIVED AFTER THIS DATE WILL BE TREATED AS LATE APPLICATIONS

IMPORTANT NOTE TO PARENT/CARER

PLEASE MAKE A NOTE OF THE DATE YOU SEND THIS FORM AND THE TELEPHONE NUMBERS BELOW. IF YOU DO NOT RECEIVE A RECEIPT WITHIN 2 WEEKS OF POSTING THIS APPLICATION, YOU MUST CONTACT THE SCHOOL ADMISSIONS TEAM ON 476637.

J625248 0817

FOR OFFICE USE - RECEIPT OF SECONDARY SCHOOL APPLICATION

Name of Child.....

Date Received..... **Name of Officer**.....



FOR OFFICE USE ONLY

Date Received	<input type="text"/>	Late	Yes / No
Inputting Officer	<input type="text"/>	Priority	Yes / No

Apply online at www.blackpool.gov.uk/schooladmissions

**ADMISSION TO
SECONDARY SCHOOLS 2018**

CLOSING DATE – 31st October 2017

Before completing this form parents must read the booklet "Admission to Blackpool Secondary Schools 2018, A Guide for Parents" on www.blackpool.gov.uk/schooladmissions or a paper copy can be requested by ringing 01253 476637.

**ONLY COMPLETE THIS FORM IF YOU ARE RESIDENT WITHIN THE BOUNDARY OF BLACKPOOL
(IF YOU PAY YOUR COUNCIL TAX TO BLACKPOOL COUNCIL)**

PART 1 - YOUR CHILD'S DETAILS

Child's Full (LEGAL) Name:
(as on birth certificate/legal documentation)

Is your child known by a different SURNAME?
If so, please state what this is :

Date of Birth: Boy Girl (please tick correct box)

Current Home Address:
Post Code:

**Only one address can be used when an allocation is to be based on distance. If parents do not live together and living arrangements for your child are shared, please specify where the child lives for the majority of the school week. (Evidence may be requested.)
IF YOU MOVE HOUSE, OR PLAN TO MOVE, BEFORE THE NATIONAL OFFER DATE OF 1st MARCH, YOU WILL NEED TO CONTACT THE SCHOOL ADMISSIONS TEAM PRIOR TO MOVING**

Child's current primary school:

Does your child have an Education, Health & Care Plan (previously known as a Statement of Special Educational Needs)? Yes No (please tick correct box)
(This is a legal document, issued by the Local Authority, which details a child's difficulties and the educational support that is provided)

If yes, please give a brief description of your child's needs:

Is this application for a child who is looked after by the Local Authority (in the care of Social Services)? Yes No

If Yes, please provide the name and telephone number of the Social Worker: (please tick correct box)

Has your child previously been looked after by a Local Authority? Yes No (please tick correct box)
Children who cease being looked after through adoption, a child arrangements order or special guardianship order, can be given priority for a school place.

If yes, please provide brief details:

If your child is subject to a Child Protection Plan, please ask your Social Worker to contact the School Admissions Team.

PART 2 - YOUR PREFERENCES

Please state below which secondary schools you would prefer your child to attend. All your preferences will be ranked in accordance with the schools' admissions policies and considered equally. If more than one school can offer a place, your highest ranked school will be allocated.

It is strongly recommended that you identify three schools. If you only state one preference and we are unable to offer a place at that school, then the Local Authority will allocate the closest community school that has availability. It may be possible to offer a place on behalf of an Academy, where places are available.

Preferred Schools (*List in order of your preference*) Please state any reasons why you are requesting these schools:

1	
2	
3	

DETAILS OF ANY SPECIAL REASONS WHY YOU FEEL YOUR CHILD SHOULD GO TO YOUR PREFERRED SCHOOL(S)

If you have any other children attending the preferred school(s), please provide their details below:

Full Name	Date of Birth	School Attending

If you or your child has a serious medical condition, please provide details. Written evidence from a consultant **MUST** also be provided – **a GP's letter is not sufficient**. This must explain the reasons why the preferred school is the only suitable school for the child. All schools can manage common conditions such as asthma and diabetes, so priority will not normally be given for these conditions.

Details

If there are any significant social or welfare reasons why your child should attend your preferred school, please provide details. Written evidence from a professional, such as a Social Worker or Police Officer, **MUST** also be provided. This must explain the reasons why the preferred school is the only suitable school for the child.

Details

PART 3 - APPLICATION FOR A FAITH SCHOOL

If you are applying for a faith school, you are required to complete an additional Supplementary Form in addition to this application. If the school is oversubscribed, a failure to complete the Supplementary Form may result in your application for a place at the school being considered against lower priority criteria, as the Governors will have no information upon which to assess the worship attendance. The Supplementary Form is available from the school and must be returned directly to the school. **We recommend that you keep a dated copy of any supplementary form you submit.**

IF YOU ARE APPLYING FOR A PLACE AT A CHURCH OF ENGLAND SCHOOL, PLEASE COMPLETE THE FOLLOWING:

Which faith do you belong to?		If you attend Church, please state which one:	
-------------------------------	--	---	--

How often do you attend church?	
---------------------------------	--

Priority is given to children with a parent/carer who is a member of the worshipping community. "Parental worshipping" is normally taken to mean a minimum of monthly attendance at church at public worship for at least one year. The Governors will request confirmation of this from the relevant member of the clergy or church officer.

IF YOU ARE APPLYING FOR A PLACE AT A CATHOLIC SCHOOL, PLEASE COMPLETE THE FOLLOWING:

Is your child a baptised Catholic? Yes No

If you have answered yes, please provide details of the place and date of baptism:

--

A SUPPLEMENTARY FORM AND/OR A COPY OF THE BAPTISMAL CERTIFICATE MUST BE PROVIDED TO THE PREFERRED SCHOOL(S) BY THE CLOSING DATE

If you attend Church, name the Parish/area of faith community in which you worship:

--

If your child is **NOT** a baptised Catholic you may wish to provide additional information in the space below about why you are seeking a place at a Catholic secondary school. (Continue on a separate sheet if necessary).

--

This area is intentionally blank.
Please do not write here.