



Mill View Primary School



The Governors of Mill View Primary School will consider children regardless of ability or aptitude. We are a non-selective school.

In Year Application Form

Has the child's current/previous school been advised of this application?	Yes/No
Do we have permission to contact the child's current/previous school with regards to this application?	Yes/No

Year Group you wish to apply for:

Child Details

Surname: Forename(s):

Male/Female (please delete as appropriate) Date of birth:

Current Address:

Post Code:

Telephone contact numbers:

Email Address:

Date place required:

Reason for changing school:

School currently attending/last school attended:

Date Child left: (if applicable)

Is the child cared for by a Local Authority (in public care)? Yes No

If yes, please state below which Local Authority, Social Worker details and a contact number:

Does your child have a **Statement** of Special Educational Needs? Yes No

Is your child **permanently excluded** from school? Yes No

Is the child's parent a crown servant as defined by the School Admissions Code? Yes No

Applicant's Details

Mr/Mrs/Miss/Ms/Dr etc	Initials:	Surname:
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Address(es): <i>(if different from pupil's address)</i>

Daytime Telephone No:	Email address:
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Relationship to Child

Siblings (and any other children living at the same address). A sibling means the brother, sister, stepbrother or stepsister, half brother or half sister living together as part of one household, already attending the preferred school and expected to continue at the school in the following school year.

Sibling Name/s:	Date of Birth:
School and Year Group:	
Does the sibling reside at the same address as the applicant? If no, please provide details.	Yes/No

Other Relevant Circumstances. Please include here any further information which you consider may be relevant to your preference. Continue on a separate sheet, if necessary. Please provide full details of dual residency , if applicable.

I declare that all the information which I have provided is true. I understand that any place offered on the basis of fraudulent or intentionally misleading information may be withdrawn.

Signed:

PRINT NAME: Date:

Data Protection Act: This School maintains a Register Entry in respect of Education which includes the administration relating to pupils. Personal information provided on this form is treated in confidence and complies with the requirements of the Act. This information may also be shared with other local authorities and Primary Care Trusts.

Verification of Information: We may verify information you have provided on this form which could involve contacting departments of the Council who maintain appropriate records. In instances where the information provided is different from that held by them they may use the information on this form.