Application Form for use by <u>Sheffield residents</u> only To apply for initial admission into Primary school –2020/21



Pupil Details:	STUD I.D							
Last Name:	First Name:							
·L								
Date of Birth:	Gender: Male / Female							
(should be between 01/09/15 and 31/08/16)	/09/15 and 31/08/16) (please circle)							
Address:								
City:	Postcode:							
If you are planning to move house you <u>must</u> tell us, overleaf We may need to ask you for proof. The school								
your child is allocated will be based on your home address as at 31st January 2020								
Current Pre-School Provider:								
Is the child a Child in Care or Previous Child in Care: Yes / No (please circle) if yes, it is important that you provide full details, in the reasons section overleaf, so that the child's application is correctly categorised-we may require proof of the circumstances. Note: Previous Children in Care are children who were in care, but ceased to be so because they were adopted or became the subject of a Residence Order or a Child Arrangement Order or Special Guardianship Order immediately following being in care. If you are unsure if your child is a Child in Care or Previous Child in Care, please contact the Admissions Team. If the child has an Educational Health Care Plan you must apply directly to the SEN Team. Parent Details:								
Last Name:	First Name:							
Relationship to child: Your telephone number: Your email address: Address: Is your home address the same as your collaboration where do you live?	hild's? Yes / No (please circle)							
If no, where do you live?								
Do you share parental responsibility with another Yes / No (please circle) If Yes, please provide: Name: Relationship to Child: Contact telephone or email: By signing overleaf you are confirming that you have								
application form with the person named above, and that you both agree on these preferences. We cannot process any application where there is a disagreement between parents.								

You must return this completed form no later than <u>15th January 2020</u> to: Admissions, People Services, Level 5: West Wing, Moorfoot, Sheffield S1 4PL

You <u>cannot</u> use this form to apply for special schools (including integrated resources) or private or independent schools. Please email <u>ed-admissions@sheffield.gov.uk</u> to tell us if your child will be attending a private or independent school.

Additional form(s) will need to be completed for voluntary aided school preferences.

Please refer to the 'Application Form Guidance' for further advice.

<u>YOU MUST</u> make sure you give the full reasons for your preference(s) on this application form - use additional paper if necessary (please put your child's name and date of birth on any extra sheets). If a preference is later refused, and you appeal, an appeal panel can only consider the reasons you gave on your original application (for Key Stage 1 appeals). If there are exceptional medical, social or a special educational needs reason for applying for a particular school, and these reasons are confirmed <u>and</u> supported by a professional, an application may be prioritised by the Admissions Committee within its admission category. It is your responsibility to provide this supporting evidence to the Admissions Team, to be received no later than 31st January 2020 - please contact Admissions if you require any further advice.

1 st Preferred S	School						Office use only: C+S CM SIB O
Reason for 1st ranked school- give full reason							
Name of any brother or sister at 1 st Preference (or linked Junior) School Date of Birth of Sibling						ing	Year Group
2nd Preferred School							Office use only: C+S CM SIB O
Reason for 2nd ranked school- give full reason							
Name of any broth	ner or sister at 2r	nd Preferer	nce (or linked Junior) Schoo	ol	Date of Birth of Sib	oling	Year Group
3rd Preferred School Office use only: C+S CM SIB O							
Reason for 3 rd ranked school give full reason							
Name of any broth	ner or sister at 3 rd	d Preferenc	ee (or linked Junior) School		Date of Birth of Sib	oling	Year Group
Declaration In the event of your child not receiving an offer of a place at a preferred school, the Authority cannot be held responsible where a place was not offered as a result of an error or omission made by you because you failed to read the information given on this application form and in the "A Guide for Parents, Entry into Primary School 2020/21" booklet, available at: www.sheffield.gov.uk/home/schools-childcare/apply-school-place I declare that all the information I have given on this application is true and correct.							
SIGNED (Parent) PRINT FULI (Parent	L NAME						
Dated:	Day		Month		Year		

Please note: If a child is offered a place at a preferred school on the basis of false or intentionally misleading information provided by you then the offer of the school place may be withdrawn.