

Application for a place at
Secondary school September 2013

You can also apply online at www.iwight.com/schooladmissions

Please list a maximum of three secondary schools you wish your child to attend in priority order. Failure to include your priority area school may result in your child being allocated a school not of your preference or some distance from your home.

Complete this form or apply online. **This form must be returned to School Admissions, County Hall, Newport, Isle of Wight, PO30 1UD.**

Your application must be completed and returned by **4.30pm on 31 October 2012**, Failure to meet this deadline will result in your application being treated as late, and your preferences will not be considered until after those that were received on time.

If you have named Christ the King College as one of your preferences, in addition to completing and returning this form to school admissions by 4.30pm on 31 October 2012, you will also need to contact the school for their own supplementary information form which should be completed and returned to the college by 4.30pm on 31 October 2012.

If you make an application online do not return this form to school admissions

1. Child's details (please amend the details below if incorrect)

Child's surname	<input type="text"/>	Child's first name	<input type="text"/>
Child's other name(s)	<input type="text"/>		
Please tick: Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Date of birth eg	Day 04	Month 05	Year 2000
	D	M	Y
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number/name of house	<input type="text"/>		
Road/street name	<input type="text"/>		
Village	<input type="text"/>		
Town	<input type="text"/>	Post code	<input type="text"/>
Parental/guardian home telephone number	<input type="text"/>	Work telephone number	<input type="text"/>
Mobile telephone number	<input type="text"/>	Email address	<input type="text"/>
Child's current school (if mainland school please provide address and phone number)	<input type="text"/>	Year group	<input type="text"/>

Do you already have an older child living with you who is (i) currently attending an Isle of Wight high school and (ii) who will still be attending the successor secondary school in September 2013? *If yes please give details below.*

Surname	<input type="text"/>	Date of birth	<input type="text"/>
First name	<input type="text"/>	Day	Month
		<input type="text"/>	<input type="text"/>
School	<input type="text"/>	Year	<input type="text"/>
		<input type="text"/>	<input type="text"/>
		Current year group	<input type="text"/>

2. Other information

- (a) Does the child have a statement of special educational needs? YES NO
- (b) Is the child in the care of a local authority? YES NO
- (c) Are you applying for a place at any of your preferred schools on medical grounds? YES NO

If yes, you should attach to this form a letter from a consultant paediatrician or similar, confirming the medical condition and stating why it is essential that your child can only attend a particular secondary school. Any supporting medical evidence MUST be received by the closing date of 4.30pm on 31 October 2012.

- (d) What is your child's ethnic origin?

White

British Irish Any other White background

Mixed

White and Black Caribbean White and Black African White and Asian Any other mixed background

Asian or Asian British

Indian Pakistani Bangladeshi Any other Asian background

Black or Black British

Caribbean African Any other Black background

Chinese or any other ethnic group

Chinese Any other ethnic group

3. Your preferred secondary schools

Please list below a maximum of three secondary schools you wish your child to attend in **priority order**. Failure to include your priority area school may result in your child being allocated a school not of your preference or some distance from your home. We strongly recommend that you read the section entitled 'What is stating a preference?' in 'Educating your Child' before listing your preferred schools.

My first preferred secondary school is

My reasons for this are (please tick as many boxes as you like):

- Distance from home to school Priority area school
- Brother/sister already attends the school (this includes any child living at the same address) Special needs (but not stated)
- Religion or faith

Other information I think is relevant (please continue on a separate sheet of paper if necessary)

My second preferred secondary school is

My reasons for this are (please tick as many boxes as you like):

- | | |
|--|--|
| <input type="checkbox"/> Distance from home to school | <input type="checkbox"/> Priority area school |
| <input type="checkbox"/> Brother/sister already attends the school
(this includes any child living at the same address) | <input type="checkbox"/> Special needs (but not statemented) |
| <input type="checkbox"/> Religion or faith | |

Other information I think is relevant (please continue on a separate sheet of paper if necessary)

My third preferred secondary school is

My reasons for this are (please tick as many boxes as you like):

- | | |
|--|--|
| <input type="checkbox"/> Distance from home to school | <input type="checkbox"/> Priority area school |
| <input type="checkbox"/> Brother/sister already attends the school
(this includes any child living at the same address) | <input type="checkbox"/> Special needs (but not statemented) |
| <input type="checkbox"/> Religion or faith | |

Other information I think is relevant (please continue on a separate sheet of paper if necessary)

4. Parents'/guardians' details

Parent/guardian 1

Mr/Mrs/Miss/Ms

First name(s)

Surname

Relationship to child

Do you live at the same address as the child?

Yes

No

Parent/guardian 2

Mr/Mrs/Miss/Ms

First name(s)

Surname

Relationship to child

Do you live at the same address as the child?

Yes

No

I(we) confirm that all the information on this form is correct and that I(we) have parental responsibility for the child named in section 1. Where parental responsibility is shared with another person who the child does not ordinarily live with, I confirm that I have made that person aware of this application. I(we) understand that the authority reserves the right to verify the information I(we) have supplied and that any offer of a place based on fraudulent information will be withdrawn.

Parent/guardian 1

Parent/guardian 2

Date

Documents I have attached to this form (please tick)

Consultant's letter or other medical information.

Other relevant information.

Important information

- If you have named Christ the King College as one of your preferences, you must contact them for their own application form also. Please see their admissions policy on page 28 of the 'Educating your child' booklet..
- A letter confirming the school where a place has been reserved for your child will be posted to you on 1 March 2013. Late applications will be considered after those received by the closing date of 4.30pm on 31 October 2012.
- **Please ensure that you use the correct postage to return the form and if you wish to know that we have received your application, you should enclose a stamped, addressed envelope. We recommend that you do this.**

Data Protection Act 1998

The information you supply on this form regarding your child will be held on computer or other filing system and may be checked against other information held by the Isle of Wight Council and any other related agency. Your child's information is covered by the Data Protection Act 1998 which gives you the right to see it if you want to. Please note that we may share your information without your consent if there is a legal requirement to do so.

If you have any queries concerning this please write to:

School Admissions, Isle of Wight Council, County Hall, Newport, Isle of Wight PO30 1UD.

Or email: school.admissions@iow.gov.uk

FOR OFFICE USE ONLY

a)

Received

Acknowledged

Copied to schools

b)

Spreadsheet

EMS

Email/Schoolbox

Confirmation for late application