**PLEASE COMPLETE IN CAPITAL LETTERS. SIGN AND RETURN TO:**

**North Leamington School, Sandy Lane, Blackdown, Leamington Spa, Warwickshire, CV32 6RD**

**admissions@northleamington.co.uk**

1. **The Student**

|  |  |
| --- | --- |
| Legal Forename | Preferred Forename |
| Middle Name(s) |  |
| Legal Surname | Preferred Surname |
| Gender: Male/Female | Date of Birth | Year Group | Are you currently Out of Education? (No School) |
| Current / Previous School in UK (if applicable): | Date of arrival in UK (if applicable): |
| Address of School | Contact at School |

1. **Parents / Carers**

|  |  |
| --- | --- |
| Title (Mr, Mrs, Miss, Ms, Dr etc.) | Relationship to student (Mother, Father, Carer, etc.) |
| Gender: Male/Female | Does this person have parental responsibility? (Please tick) Yes No  |
| Forename |
| Surname | Email |

**Current home address**

|  |  |
| --- | --- |
| House Number/Name | County |
| Road/Street | Postcode |
| City/Town | Home Telephone |
| Daytime contact number | Evening contact number |
| If Parent / Carer’s home address differs from student please provide details below: |

1. **Additional information** (Please tick or complete as required)

|  |  |
| --- | --- |
| Is the student Looked After, **or previously** Looked After?\*  Yes No If Yes, which Local Authority? | \*Children in the care of, or provided with accommodation by, a local authority and children who were looked after, but ceased to be so because they were adopted (or became subject to a residence order or special guardianship order)  |
| Does the student have a Statement of Special Needs or EHC Plan? Yes No | Are you a member of staff at North Leamington School? Yes No |
| Does the student have any siblings at North Leamington School?  Yes No | Name, Year and College of sibling(s) |
| What are your reasons for applying to North Leamington School? |
| **Declaration** |
| * **I confirm that I have read and understood the current Admission Policy for applying for a place at North Leamington School.**
* **I certify that the information given is correct and understand that giving false or misleading information may result in a place being withdrawn**
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| **Signature** | **Date** |