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

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

1. **The Student**

|  |  |
| --- | --- |
| Legal Forename | Preferred Forename |
| Middle Name(s) |  |
| Legal Surname | Preferred Surname |
| Date of Birth | Gender: Male/Female/Other | Previous School |
| Last school in UK (if applicable): | Date of arrival in UK (if applicable): |
| First Language – (any language, other than English, that a child was exposed to during early development): |

**Current home address**

|  |  |
| --- | --- |
| House Number/Name | Postcode |
| Road/Street | Home Telephone Number |
| City/Town |
| County |

1. **Parents / Carers**

**All Parents/Carers with parental responsibility are entitled to have access to student information on Insight and be included in school elections and ballots.**

**Please enter Parents/Carers LIVING AT THE ABOVE ADDRESS who have PARENTAL RESPONSIBILITY:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contact Priority (please circle) | 1 | 2 | 3 | 4 |
| Title (Mr, Mrs, Miss, Ms, Dr etc.) | Mobile  |
| Gender: Male/Female/Other | Home Email  |
| Forename | Place of Work |
| Surname | Work Telephone |
| Relationship (Mother, Father, Grandparent, Carer, Guardian, etc.) | Work Email |
|  |  |
| Contact Priority (please circle) | 1 | 2 | 3 | 4 |
| Title (Mr, Mrs, Miss, Ms, Dr etc.) | Mobile |
| Gender: Male/Female/Other | Home Email |
| Forename | Place of Work |
| Surname | Work Telephone |
| Relationship (Mother, Father, Grandparent, Carer, Guardian, etc.) | Work Email |

**Please enter details below of those LIVING AT A DIFFERENT ADDRESS WITH PARENTAL RESPONSIBILITY.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contact Priority (please circle) | 1 | 2 | 3 | 4 |
| Title (Mr, Mrs, Miss, Ms, Dr etc.) | County |
| Gender: Male/Female/Other | Postcode |
| Forename | Home Telephone |
| Surname | Mobile |
| Relationship (Mother, Father, Grandparent, Carer, Guardian, etc.) | Home Email |
| House Number/Name | Place of Work |
| Road/Street | Work Telephone |
| City/Town | Work Email |

**ADDITIONAL EMERGENCY CONTACT NUMBER. Please enter details below in case of emergency when Parent/Carer unavailable.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contact Priority (please circle) | 1 | 2 | 3 | 4 |
| Title (Mr, Mrs, Miss, Ms, Dr, etc.) | Relationship |
| Forename | Home Telephone |
| Surname | Mobile |

1. **Family Information**

**Siblings. Please enter the name(s) of siblings who attend North Leamington School.**

|  |  |  |
| --- | --- | --- |
| Forename(s) | Surname | VT Group |
| Forename(s) | Surname | VT Group |
| Forename(s) | Surname | VT Group |

**Medical Information.**

|  |  |
| --- | --- |
| Doctor and/or Medical Practice | Address |
| Telephone | Postcode |
| Please give details of any medical conditions/disability you feel the school needs to be aware of: |

**Access arrangements. At your previous school were any access arrangements in place? Please circle and enter details.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|    Yes No | Extra Time | Reader | Scribe | Bi-Lingual Dictionary | Laptop |
| Other (enter details) |

**Ethnicity. Please circle ONE ONLY to describe your ethnicity.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| White British | White Irish | White & Asian | White & Black African | White & Black Caribbean | Pakistani | Bangladeshi | Indian | Black African | Black Caribbean |
| Any other White background | Traveller of Irish Heritage | Any other Asian background | Any other Black background | Any other mixed background | Chinese | Gypsy/Roma | Any other ethnic background | Refusal to declare |  |

**Religion. Please circle ONE ONLY to state your religion.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Anglican | Baptist | Buddhist | Christian | Hindu | Jehovah’s Witness | Jewish | Methodist | Muslim | Catholic |
| Sikh | United Reform  | Other religion | No religion | Refusal to declare |  |  |  |  |  |

**Travelling to school. Please circle ONE ONLY as your MAIN mode of travel.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| School Bus | Public Bus | Car/Van | Car Share | Cycle | Taxi | Train | Walk | Other |

**Additional School/student Funding Opportunities (Circle which apply)**

|  |  |  |
| --- | --- | --- |
| Are you currently entitled to Free School Meals (not necessarily claiming them), or have been within the last 6 years? You can check if you qualify and eligibility for this at <https://www.warwickshire.gov.uk/freeschoolmeals>  | YES | NO |
| Are you a family where one or more parents are currently serving,  **AS A REGULAR,** in the British Armed Forces? (or have in the past 5 years) | YES | NO |
| Has the student **EVER** been Looked After immediately before adoption OR being placed on a special guardianship or residence order? | YES | NO |

**If you have selected YES to any of the above, are you aware that the school can receive extra funding to assist with the learning of pupils with eligibility in these categories?**

To receive the funding, North Leamington School requires your assistance. To see further details, please see with the school website:

[www.northleamington.co.uk](http://www.northleamington.co.uk); or If you would like the school to contact you with information on how to go about it then please tick the following box:

|  |
| --- |
|  |

 YES I would like NLS to contact me about claiming extra funding for the school

**I certify that the information provided by me on this form is true and accurate.**

**Signed (Parent/Carer) Print name**

 **Date**