



Lynch Hill School Primary Academy Application form for 2019-2020 In-Year Admissions

Please read the school's Admission Policy carefully before completing this form.

Child's details		
Surname:	Forename:	DoB [Birth Certificate attached]
Male/ Female	Home language / mother tongue:	
Address: [Please provide a copy of current council tax statement to verify address]		
Postcode:		
Child's current school (if applicable)		
Religion		

Nursery Applications only – Preferred Time Slot		
AM	PM	Extended

Details of first parent/carer living at home address		
Title	Initials	Surname
Relationship to child		
Home tel:	Work tel:	Mobile:

Details of second parent/carer		
Title	Initials	Surname
Relationship to child:		
Home tel:	Work tel:	Mobile

Does your child have a statement of special educational needs? YES / NO
Is your child in the public care of a local authority? YES / NO
If yes, please state which authority:
If yes, please also provide a letter from Social Services confirming the legal status of the child and the local authority responsible for the child.
Is the child privately fostered? YES / NO <small>ie. cared for by someone other than the parent without the involvement of the local authority</small>

Full names, DoB and year group of any siblings already attending this school.

Documentation required
Please provide COPIES, not originals.

- Birth Certificate
- Council Tax statement

Declaration and signature of parent/carer

- I wish to apply for a place at Lynch Hill School for my child
- I certify that, to best of my knowledge, the information given is correct
- I understand that any false or deliberately misleading information given on this form and/or supporting information may render this application invalid or lead to the offer of a place being withdrawn at a later date.

Signature of Parent / Guardian	Date
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For office use only:

Birth certificate copy attached YES / NO
Council tax statement copy attached YES / NO