

### PLEASE COMPLETE ALL FIVE SECTIONS

#### 1. PUPIL INFORMATION

**Pupil's surname:** \_\_\_\_\_ **Pupil's forename(s):** \_\_\_\_\_

(In full and in BLOCK LETTERS as it appears on Birth Certificate or Passport.)

**Pupil's full date of birth:** \_\_\_\_\_

Gender (please tick)

Male

Female

Pupil type:  Day

Day Boarder (limited)

Weekly Boarder

Full Boarder

Nationality: \_\_\_\_\_

First language: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Religion: \_\_\_\_\_

**Joining in Academic Year:** 20 \_\_\_\_\_

**Into Year Group:**

First Year (Year 9)

Lower Fifth (Year 10)

**One Year Stay?**  Yes  No

Pre-Sixth

Lower Sixth (Year 12)

If the pupil is registered at any other school/s, please detail which:

\_\_\_\_\_

**Pupil's current school:** \_\_\_\_\_ **Postcode of school:** \_\_\_\_\_

Name of current Head: \_\_\_\_\_

Do you consent to Bede's contacting your child's current school for a reference:  Yes

No

Date pupil started at the school: \_\_\_\_\_

Please state whether lessons are taught in English:

Yes

No

Are you intending to apply for a Scholarship? (First Year or Lower Sixth only)

Yes

No

If yes, which:

Academic

Art/DT

Dance

Drama

Music

Sport

Please confirm whether the student will require sponsorship from Bede's in order to obtain a visa to study in the United Kingdom:

Yes

No

Please mention here the names of any other members of the family attending the School or registered for entry; or any other connection with the School (e.g. members of the family who are or who have been members of the School staff, or who have previously attended the School).

## PUPIL ACHIEVEMENTS/INTERESTS

Please outline a few of the student's most notable achievements (academic, artistic, dramatic, musical, sporting, etc.), their hobbies and main interests. Please attach additional sheets to this form if necessary.

## 2. MEDICAL/CONFIDENTIAL INFORMATION

Has or does your child suffer/ed from:

An ongoing condition/health problem/allergy  Yes  No

Mental health issues including eating disorders, or is subject to CAMHS referral  Yes  No

Learning difficulties, emotional and/or social difficulties  Yes  No

Has your child ever been excluded or suspended from any school?  Yes  No

If you have answered yes to any of the above questions we may require further information from you but, in the meantime, please provide details in the box below.

*Note: This information is of the utmost importance, as it will assist us in considering any adjustments we might need to make to assist your child in the Bede's admissions process, as well as when they enter the school. An offer of a place is conditional on full disclosure. All information received in this form will be treated in confidence. Bede's must be kept informed of any changes and/or development in relation to the above from Registration until starting at the school.*

**3. PARENT INFORMATION**

Please indicate below the relationship between the mother and the father:

- Single       Partners (not married)       Married (to each other)       Separated       Divorced       Widowed

In the case of only one parental contact, please provide a brief note of explanation (as we normally require two signatures for the Registration Form).

**Full name and title of Primary Parent:**

**Full name and title of Second Parent:**

\_\_\_\_\_

Relationship to pupil: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Region/Town: \_\_\_\_\_

Country: \_\_\_\_\_

Postcode: \_\_\_\_\_

Daytime telephone: \_\_\_\_\_

Home telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Tick if this is the pupil's usual residential address

Occupation: \_\_\_\_\_

Employer's business and name: \_\_\_\_\_

Do both parents have parental responsibility for the child?       Yes       No

Do both parents agree that the child should attend Bede's?       Yes       No

If the answer to any of the questions above is No then please give details in a covering letter.

Is there anyone else whose consent would be required for your child to attend Bede's?       Yes       No

Is it proposed that anyone other than the parents will pay or guarantee payment of fees?       Yes       No

If the answer to any of the questions above is Yes then please give details in a covering letter.

**Special Circumstances**

**Please inform us in a covering letter if there are any Court Orders in relation to the child, for example as to parental responsibility; residence; contact; prohibited steps; specific issues or periodical payments, or; in relation to the parents or if either parent is an undischarged bankrupt or subject to an individual voluntary arrangement.**

#### 4. DECLARATION

*Note: all of those with parental responsibility must complete and sign the declaration below. If anyone else has parental responsibility for the child, please provide their names and addresses on a separate sheet as their consent to the child attending Bede's will be required.*

**I/We request that the name of our above-named child be registered as a prospective student.**

**I/We enclose the non-refundable Registration Fee of £100.**

**I/We understand that the terms and conditions of the School will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the School.**

**I/We understand also that the School (through the Head, as the person responsible) may obtain, process and hold personal information about our child, including sensitive information such as medical details, and we consent to this for the purposes of assessment and, if a place is later offered, in order to safeguard and promote the welfare of the child.**

Print name in full BLOCK CAPITALS:

Print name in full BLOCK CAPITALS:

\_\_\_\_\_

\_\_\_\_\_

Relationship to the Child:

Relationship to the Child:

**First Signature**

**Second Signature**

Date:

Date:

#### 5. PAYMENT DETAILS

Please tick payment option:

- By cheque *Cheques should be made out to St Bede's School Trust Sussex.*
- By bank transfer *Please use your child's name as a reference, and let us know the date and details of your transfer.*

St Bede's School Trust Sussex  
Barclays Bank Plc  
London Medium Business  
United Kingdom House  
180 Oxford Street  
London W1D 1EA

Account No: 40794104  
Sort Code: 20-06-05  
IBAN: GB15 BARC 2006 0540 7941 04  
SWIFTBIC: BARCGB22

Once completed, please send this form to:

The Admissions Team, Bede's Senior School, Upper Dicker, Hailsham, East Sussex, BN27 3QH.

Tel: +44 (0) 1323 443 838 Email: [admissions@bedes.org](mailto:admissions@bedes.org)

St. Bede's School Trust Sussex Limited: a Company Limited by Guarantee

Registered in England No: 01020167

Registered Office: Upper Dicker, Hailsham, East Sussex BN27 3QH

Registered Charity No: 278950

**Please tell us how you first heard about Bede's:**

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Present School                          | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Friends                            | <input type="checkbox"/> Open Morning    |
| <input type="checkbox"/> Website                                 | <input type="checkbox"/> Reputation    | <input type="checkbox"/> Agent                              | <input type="checkbox"/> Existing Parent |
| <input type="checkbox"/> Club/Group (please give details): _____ |  | <input type="checkbox"/> Other (please give details): _____ |  |