

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 pupil 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 pupil'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

Does or has 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, please use the box below to provide details. Attach additional sheets to this form if necessary.

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 might enter the school. An offer of a place is conditional on full disclosure. All information received in this form will be treated in confidence.

3. OTHER INFORMATION

Does the above child have a statement of Special Educational Needs or an EHC Plan?

Yes No

Is the above child a 'Looked After Child' or have they previously been a 'Looked After Child'?

Yes No

If the answer to the above question is YES, please give the name of the authority:

4. 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.

5. 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 pupil.

I/We enclose the non-refundable Registration Fee of £150.

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.

I/We agree to the School undertaking an insolvency search on the fee payers prior to the completion of the admissions process.

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:

6. 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
Barclays Corporate
Level 27, 1 Churchill Place
London E14 5HP

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

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

Registered In England No: 01020167

Registered Office: Bede's Senior School, 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): _____	