

# INTERNATIONAL REGISTRATION FORM FOR PRIOR PARK COLLEGE

To be completed by those with Parental Responsibility\* for the child Please note: All applications should come with a copy of the pupil's passport

Please print clearly in CAPITALS

should be aware of: (please state)

# **PUPIL'S DETAILS**

	Pupil's name in full:										
	Date of	birth:			Year	of Entry:			Term of	Entry:	
	ENTRY I	INTO YEAR:	7	8	9	10	11	12			
	GENDE	R: Male	Fema	ale		STATUS	: Day	Weekly Boarde	er	Full Boarder	
	Nationa	lity:						Country of origin:			
	First lan	guage:						Religious denomina	ation:		
	Name o	f present sch	nool:								
	Address	of present s	school:								
	Dates of	f attendance	:					Name of Head:			
	Other so	chools the pu	upil has ap	oplied to:							
	For a pupil who requires a Child Student visa  The College is currently a highly trusted Child Student sponsor (via the Home Office's UK Visas and Immigration (UKVI Unit).  Please tick this box if you require the school to sponsor your child for visa/immigration purposes.  The College will refer you to The Nathanson Partnership (THP), an agency that oversees Prior Park College applications. All applicants will need to make a Compliance Management Fee (£750), payable to the school, in order to proceed with the application.  If you do not require the School to sponsor your child please confirm that your child has or will have a time-restricted or temporary visa in any other immigration category (for example, as a dependent) and please provide a copy. Please also provide any further relevant details:										
	PARENTS Father**	O' DETAILS						Mother**			
TITLE	- 1 4 1 1 0 1										
NAME											
ADDRESS											
OCCUPATION											
NATIONALITY											
HOME TEL											
WORK TEL											
MOBILE											
EMAIL											
	**If you have parental responsibility for the child in a capacity other than as a parent of the child, please state your relationship to the										
	child: Any parer	nt circumstar	nces we								

<sup>\*</sup> Parental responsibility is defined in the Children Act 1989 as "all rights, duties, powers and responsibilities and authority which by law a parent of a child has in relation to the child and his or her property". It equates to legal responsibility for the child. If you have any doubts about whether you do or do not have parental responsibility for the child you may wish to seek legal advice.

Name(s) of sibling	(s) and scho	ool(s) attending	g: (please state)									
Any connection wi	th Prior Park	« Schools? (nlea	se state)									
How did you hear abo		Referral	Internet	٨ ٥٥	)ncv	O41						
now did you near abi	out us:	Referral	memet	Age	ency	Other						
EDUCATION, HEAL Has your child receive			vious school(s), f	or example,	, booster gro	oup, TA sup	port or EAL sup	port? P	lease give de	tails / dates:		
Are there any circui	mstances or	conditions rela	ating to your child	l of which t	he School sl	nould be av	vare? Please tic	k as apı	propriate:			
ADHD Dysp	oraxia	Autism	Dyslexia	Visual im	pairment	Hear	ing impairment					
Other (please speci	ify)											
Please enclose the reducational reports			hologist's report i	f you have o	one. Please a	also send u	s any relevant m	nedical,	special needs	s or other		
Does your child hav	e any of the	following heal	th conditions/nee	eds? Please	tick as app	ropriate:						
Mild allergy requirir	ng avoidanc	e/no treatment	Moderate a	llergy requi	ring antihis	tamines	Severe allerg	y requir	ing Adrenaliı	ne Auto Injector		
Please specify what	the allergy	is to i.e. peanu	ts				Asthma	Other	respiratory	condition (please		
specify)			Diabet	es Ep	oilepsy	A congen	ital heart condi	tion	Anxiety	Depression		
Bipolar Disorder	Other N	Mental Health c	ondidtion requiri	ng medicat	ions (please	state)						
<b>DATA PROTECTION</b> We consent to the College obtaining, using and holding 'personal data' including 'sensitive personal data' such as medical information, to be processed lawfully and fairly in accordance with the Data Protection Act 1998, for the purposes of safeguarding and promoting the welfare of our child and ensuring that all relevant legal obligations of the College and ourselves are met. <b>DECLARATION</b> We request that the pupil named be registered as a prospective pupil <b>AND</b> we will make a sterling equivalent direct transfer for the non-refundable Registration Fee of £150. We understand that:  - Registration of our child as a prospective pupil does not secure our child a place at the College but does ensure that our child will be considered for selection						<ul> <li>The College may process personal data about our child, including sensitive personal data such as medical details, for the purpose of administering its list of prospective pupils and administering its selection procedures and we consent to the processing of our child's personal data (including sensitive personal data) for these purposes</li> <li>In the event that our child is offered a place at the College, such an offer will be subject to Prior Park Schools' terms and conditions for the provision of educational services, which will bind us in the event that we accept the place</li> <li>In order to comply with the School's responsibilities as a registered Tier 4 sponsor, we consent to the School notifying and/or supplying information relating to us and/or our child's right to enter, reside and/or study in the United Kingdom to the United Kingdom Visas and Immigration (UKVI) unit of the Home Office and, in any event, if our child is offered a place at the School, such an offer will be subject to us confirming that our child has the right to enter, live and study in the United Kingdom</li> </ul>						
First signature:*					Second s	ignature:*						
Name in full: (please	e print)				Name in	full: (please <sub>l</sub>	orint)					
Relationship to child:						Relationship to child:						
Date:					Date:							
*A typed signature is A copy of the curren		the standard te	rms and condition	ns is availab	le on reques	st.						
£150 REGISTRATIO	N FEE PAYN	<b>IENT</b> Sterling	Equivalent Direct	Transfer	Flywire							
IF PARENTS ARE NO	OT RESPON	SIBLE FOR FEE	PAYMENT, PLEA	SE GIVE D	ETAILS OF I	EE PAYER	BELOW					
Title & Name:				Address								

Email:

Tel:

### **BANKING DETAILS FOR PRIOR PARK COLLEGE** How we may use personal information

# Barclays Bank plc

4-5 Southgate Street, Bath, BA11AQ

20-47-06 Sort Code: 80736627 Account No:

Account Name: Prior Park Educational Trust

IBAN: GB52BARC20470680736627 SWIFT CODE: BARCGB22

The School may process personal data about you (or either of you) and your child, including sensitive personal data about your child (such as medical details) in accordance with data protection law for the purposes of:

- its registration, selection and/or admission procedures, including as set out above; and
- communicating with the parents of prospective pupils about the School and generally managing relationships between the (iii) School and its prospective pupils.

Even if your child is not offered a place at the School, we retain information about prospective pupils and their parents for up to two years. Please let the Registrar know if you have any questions or concerns about this.

### Please return this completed form to:

Prior Park College, Ralph Allen Drive, Bath, BA2 5AH

Tel: +44 (0)1225 831 000 Email: admissions.ppc@priorparkschools.com