



## Lynch Hill School Primary Academy In-Year and Nursery Application form

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:                               |           |         |
| Email:   |           |         |
| National Insurance No.                               |           | DoB.    |
| Home tel:  | Work tel: | Mobile: |

| Details of second parent/carer |           |         |
|--------------------------------|-----------|---------|
| Title                          | Initials  | Surname |
| Relationship to child:         |           |         |
| Email:                         |           |         |
| National Insurance No.         |           | DoB.    |
| Home tel:                      | Work tel: | Mobile: |

|   |   |
|---|---|
| Does your child have a statement of special educational needs?  | YES / NO  |
| Does your child have a Disability Living Allowance?   | 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. |
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| <b>Documentation required</b>  |
| Please provide <u>COPIES</u> , not originals.  |
| <ul style="list-style-type: none"> <li>• Birth Certificate</li> <li>• Council Tax statement</li> </ul> |

|  |      |
|--|------|
| <b>Declaration and signature of parent/carer</b>   |      |
| <ul style="list-style-type: none"> <li>• I wish to apply for a place at Lynch Hill School for my child</li> <li>• I certify that, to best of my knowledge, the information given is correct</li> <li>• 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.</li> </ul> |      |
| Signature of Parent / Guardian   | Date |

|   |
|---|
| For office use only:                              |
| Birth certificate copy attached      YES / NO     |
| Council tax statement copy attached      YES / NO |