



NESTON
HIGH SCHOOL

In Year Application Form

Before proceeding with your application, please be aware that your child's current/previous school may be contacted to request further information to assist with the admissions process. If you do not wish to proceed with your application, please contact the Local Authority on **0300 123 7039**.

Name of school you wish to apply for:	Year group:
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Child Details

Surname:	Date of birth:	
Forename(s):	Male ☐ Female ☐	
Current address:	Address to which you are moving (if applicable):	
Postcode:	Postcode:	
Telephone number:	Moving date:	
Email address:		
Ethnicity:	Nationality:	First Language:

Reason for changing school (continue on a separate sheet if necessary):	Date place required:
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School currently attending/last school attended:	Date left current school (if applicable):
Start date at this school:	Date last attended (if not currently attending):

Please tick the appropriate box:	YES	NO
Does your child have an Education, Health and Care Plan (EHCP)?	☐	☐
Is your child's parent a crown servant as defined by School Admissions Code?	☐	☐
Was your child previously looked after but ceased to be so because they were adopted (or became subject to a residence, or special guardianship order)?	☐	☐
Is your child 'cared for' by a Local Authority (in public care)?	☐	☐
If you have answered yes to the previous question, please include the details below:		
Local Authority:		
Social Worker Name:		
Social Worker Telephone Number:		

Fair Access Protocol

The following questions are used to determine whether a student meets any of the criteria defined by the Fair Access Protocol.

Please tick the appropriate box:	YES	NO
a) Is your child currently subject to, or has your child been subject to a Child in Need or Child Protection Plan within the last 12 months?	☐	☐
b) Does your child live in a refuge or other relevant accommodation?	☐	☐
c) Is your child from the criminal justice system?	☐	☐
d) Is your child in alternative provision and needs to be re-integrated into mainstream education, or have they been permanently excluded but have been deemed suitable for mainstream education?	☐	☐
e) Does your child have any special educational needs or disabilities (but without an Education, Health and Care Plan)?	☐	☐
f) Does your child have caring responsibilities for another family member?	☐	☐
g) Is your child homeless?	☐	☐
h) Is your child in a formal kinship care arrangement?	☐	☐
i) Is your child a member of the Traveller, Roma or Gypsy community, or do they have refugee or asylum-seeker status?	☐	☐
j) Have there been any issues of challenging behaviour?	☐	☐
k) Is your child currently in Elective Home Education (i.e. not on a school roll)?	☐	☐
l) Has your child been out of education for 4 weeks or more?	☐	☐

If you have answered 'Yes' to any of the questions above, please include further information here:

Other relevant circumstances

Please include any further information which you consider may be relevant to your application. Continue on a separate sheet if necessary.

Applicant Details

Mr/Mrs/Miss/Ms/Dr/etc.:	Forename:	Surname:	Daytime Telephone No.:
Address (if different from pupil's address):			
Email address:		Relationship to child:	

Siblings (and any other children living at the same address). A sibling means the brother, sister, stepbrother or stepsister, half-brother or half-sister living together as part of one household, already attending the preferred school and expected to continue at the school in the following year.

Sibling name:	School and year group:	Date of birth:
Does the sibling reside at the same address as the applicant? Yes ☐ No ☐		
If no, please provide details:		

I declare that all the information which I have provided is true. I understand that any school/academy place offered on the basis of fraudulent or intentionally misleading information may be withdrawn.

Signed:

Print Name:	Date:
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Data Protection:

The Council/School/Academy maintains a Register Entry in respect of Education which includes the administration relating to pupils. Personal information provided on this form is treated in confidence and complies with the requirements of the Act. This information may also be shared with other local authorities and Primary Care Trusts.

Verification of Information:

The Council/School/Academy may verify information you have provided on this form which could involve contacting other departments of the Council who maintain appropriate records. In instances where the information provided is different from that held by them, they may use the information on this form.

Please return completed form to:

Neston High School (Admissions)
Raby Park Road
Neston
Cheshire
CH64 9NH

Or via email to:

admissions@nestonhigh.com

For office use only

Date received:

Date offer/refusal letter sent: