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| Sefton Council logo  **Late Application / Change of Preference for Admission to**  **Secondary School - September 2021** |

# Please complete this form if you live in Sefton and this is your first request for a place at a Secondary School or if you wish to choose an alternative school to the school already allocated to your child for September 2021.

# Further information regarding school admissions within Sefton is available at: [www.sefton.gov.uk/admissions](http://www.sefton.gov.uk/admissions)

Please return this form via email to: [admissions@sefton.gov.uk](mailto:admissions@sefton.gov.uk) or by post to: **Sefton Council,** **School Admissions Team, Town Hall, Oriel Road, Bootle, Liverpool, L20 7AE**

# Please complete BOTH sides of this form in black ink and BLOCK CAPITALS

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| **1.** **Child’s Details** | | |
| Surname: | First Name: | Middle Names: |
| Please Tick: Male  Female  Child’s Date of Birth: | | |
| Current Primary School: | | |
| Child’s home address: | | |
| Post Code: | | |
| Secondary School currently allocated: | | |

**2. School Preferences School/s you wish to apply for:**

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| **Preference 1.** | School Name | Reason |
| **Preference 2.** | School Name | Reason |
| **Preference 3.** | School Name | Reason |

Please name below any older children living at the same address who will still be attending Secondary School in September 2021:

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| Name of older child(ren) | Date of Birth | School Attending |

If you are completing this application due to a house move, please provide your previous/proposed address, together with the date your move took place or is due to take place:

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| Previous/proposed address (please delete as appropriate):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post code:\_\_\_\_\_\_\_\_\_\_ | Date move took place/is due to take place: |

**PLEASE CONTINUE COMPLETING THIS APPLICATION FORM OVERLEAF**

**3. Other Details**

Is the child (or has the child previously) been in Public Care of a Local Authority? Yes  No 

If yes, please state which Local Authority: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and telephone number of Social Worker:

Does your child have an Education and Health Care Plan (EHCP)? Yes  No 

The following question must be answered if you have indicated a Catholic Secondary School as one of your preferences:

Has your child been baptised Catholic? Yes  No 

If you have ticked ‘yes’, you may also need to complete the **school’s Supplementary Information Form** (if you have not already done so)**.** Please go to the Sefton website & read the Parents Guide to School Admissions for further information.

**4. Parent’s/Carer’s Details**

Mr/Miss/Ms/Mrs Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Telephone no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from child’s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where there is more than one parent/carer living at the permanent home address included in the application please include name of the second adult below (this is used for address validation purposes).

Mr/Miss/Ms/Mrs Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Declaration and Signature of Parent/Carer**

#### Terms and Conditions

Sefton reserves the right to verify the information given on this form. Any offer of a place will be on the basis that the information supplied is correct and up to date. Fraudulent or intentionally misleading information may lead to the offer of a place being withdrawn. A false declaration may also result in legal proceedings.

#### Data Protection

Sefton Council maintains an electronic database in respect of all pupils who apply for a school place within Sefton. All personal information provided within this application is treated in strict confidence in accordance with the requirements of the Data Protection Act 2018. We may verify information you have provided by contacting other Council Departments who maintain appropriate records for Sefton residents. The data may be shared with the DfE, other Local Authorities and other appropriate agencies, for the purpose of the provision of services to your child. The application information held within the electronic database may be held for up to 7 years.

#### Declaration

I declare that I have checked the information given in this application and believe it to be correct. I confirm that I have read and agree to the terms and conditions set out above. I confirm that I am the person with parental responsibility for the child named above. I understand that any false or deliberately misleading information on this application and/or supporting documents may render this application invalid or lead to the offer of a school place being withdrawn.

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| Parents / Carer Signature: Date: |