

SCHOOL ADMISSIONS APPLICATION FORM
CHESHIRE EAST RESIDENTS ONLY

For office use only - Date Received:

SURNAME

DATE OF BIRTH

FIRST NAME(S)

SEX

M

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F

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YOUR CHILD'S PERMANENT ADDRESS

PLEASE NOTE: Addresses will be checked and any place gained using a false address will be withdrawn.

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Postcode..... Phone No

Length of time at this address:Yrs.....Mths

NB. If you are moving please provide details overleaf.

Child's current school (if applicable)

School.....

Local Authority.....

Year Group.....

NB. If your child is not in school
please provide detail overleaf.

PARENT/CARER DETAILS:

Title	Initials	Surname	Mobile	Home	Work
(e.g. Mr Mrs Ms other)					
Address (if different from pupil's address)			Relationship to child		
			email address (where available)		

Does your child have a Statement of Special Educational Needs?	Yes	No
Is your child ' Cared for ' by a Local Authority (<i>i.e. in public care</i>)? Please state which Local Authority.	Yes	No

School Preferences. Please state 3 preferences in **ranked order**. (Do not include fee-paying independent schools) Please include schools in other English authorities. Your home local authority (Cheshire East Council) will liaise with the maintaining authority on your behalf.

<i>Example</i>	<i>Community High School</i>	<i>Cheshire East Council</i>
1st Preference		
2nd Preference		
3rd Preference		

Please tick any of the following reasons applicable to each of your preferences.

Reasons	1 st Pref	2 nd Pref	3 rd Pref
Sibling (brothers and sisters) (<i>provide details overleaf</i>)			
Medical/Social (supporting information must be provided)			
Religion/Faith (<i>please state</i>)			

ADDITIONAL INFORMATION

Please include here any additional information which you consider may be relevant to your application. Continue on a separate sheet, if necessary. You may wish to make separate statements in support of each of your preferences. If medical or social reasons are being provided for consideration under the Council's published oversubscription criteria (criterion 2), supporting evidence must be provided with your application. Please refer to the Authority's Information Booklet for details about each school's oversubscription criteria.

Please continue on a separate sheet if necessary...

Siblings (A sibling means an elder brother or sister, step-brother or step-sister, half-brother or half-sister, adopted brother or adopted sister living together as part of one household, already attending the preferred school and expected to continue at the school at the time of admission)				
Name of sibling(s)	Date of Birth	Address of sibling	School	Year Group

VOLUNTARY (CHURCH) AIDED SCHOOL APPLICATIONS

If you have stated a preference for a Voluntary (Church) Aided School **you should also contact the preferred school** as you may need to complete a supplementary information form.

<p>I declare that all the information which I have provided is true. <u>I understand that any school place offered on the basis of fraudulent or intentionally misleading information may be withdrawn.</u> I have read the Council's information booklet on admissions.</p> <p>Signed..... (Mr/Mrs/Miss/Ms/other)</p> <p>Print Name..... Date.....</p>	
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PLEASE RETURN THIS FORM TO:

Cheshire East Borough Council, School Admissions Service, Delamere House (EC), Delamere Street, Crewe, Cheshire CW1 2LL or by e-mail to admissions@cheshireeast.gov.uk .

DATA PROTECTION ACT

The Council 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

VERIFICATION OF INFORMATION – the Council 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.