Reception Year Group Admissions Application Form - September 2025

- Do not complete this form if your child has an Education, Health and Care Plan.
- Please consult your case officer for advice if a statutory assessment is in progress.
- Before completing this form please read the 'How do I apply for a school place' section in the Admission to Primary Schools guide. This link can be found at <u>www.southglos.gov.uk/admissions</u>.
- Please complete this application form in black ink and in block capitals.

When completed this form should be returned to the Admissions and Transport Team either by:

- email at: <u>admissionsandtransport@southglos.gov.uk;</u> or
- post to: South Gloucestershire Council, Department for People, PO Box 1955, Admissions and Transport Team, Bristol, BS37 9DE; or
- by visiting a South Gloucestershire Council One Stop Shop.

NO LATER than 15 JANUARY 2025. Applications received after this date will not normally be considered until all applications received by the closing date have been considered.

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Section 1: Pupil details

1)	First name(s):											
2)	Surname:											
4) 5)	Date of birth: DD MM YY C											
7a)	7a) If child is subject to a Care Order or is accommodated by Social Services, enter name of local authority											
 7b)	7b) Tick box if the child was Previously in Public Care/Looked After/Internationally Adopted Previously Looked After* by a local authority but ceased to be so because they were adopted ¹ (or became subject to a residence order ² or special guardianship order ³).											
	 * Documentation will need to be provided as proof of care status. 1 Under the terms of the Adoption and Children Act 2002. 2 Under the terms of the Children Act 1989. 3 Section 14A of the Children Act 1989. 											
8)	Tick box if the child has a statutory assessment in progress for an Education, Health and Care Plan											

Section 2: Parent / carer details

1) Title:	
 Address (if different from child's home address in section 1): Please note: this is the address to which all correspondence will be sent 	
5) Postcode:	
6) Email:	
At least one telephone number should be supplied	
7) Home: 8) Work: 9) Mobile:	
10) What is your relationship to the child? (e.g. Mother, father, step parent etc)	
11) Please tick the box if you have Parental Responsibility for the child:	
 12) Security password: * * Optional boxes: If you supply a security password this must be provided when making any enquiries 	S
about the progress of this application.	
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*	If you ticked the box above to indicate that the child has an older brother or sister (sibling) who will be attending this school, or the paired junior school, in the same school year that this application is for, fill in the sibling details below.										
4)	Sibling first name:										
6)	Sibling surname:										
7)	Date of birth: DD MM YY										
8)	Sibling's home address and postcode (if different from child's home address in section 1):										
	9) Postcode:										
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	ction 4: School second preference details										
1)	Name of second preference school:										
2)	Postcode or address of second preference school:										
3)	Tick one or more of the following boxes to indicate reason(s) for your preference (where appropriate):										
	Older sibling at school * Religion or faith										
givi	ease note: Whilst all admission authorities will have regard to the reasons for your school preference, ing reasons for your preference does not guarantee a place at your preferred school or mean that mission authorities can deviate from their published admission policies.										
Use	e the space below to provide additional information to support your application for this school.										
* If you ticked the box above to indicate that the child has an older brother or sister (sibling) who will be attending this school, or the paired junior school, in the same school year that this application is for, fill in the sibling details below.											
4)	Sibling first name:										
6)	Sibling surname:										
7)	Date of birth: DD MM YY										
8)	Sibling's home address and postcode (if different from child's home address in section 1):										
	9) Postcode:										

Section 5: School third preference details

1)	Name of third preference school:									
2)	Postcode or address of third preference school:									
3)	Tick one or more of the following boxes to indicate reason(s) for your preference (where appropriate): Older sibling at school * Religion or faith									
givi	ease note: Whilst all admission authorities will have regard to the reasons for your school preference, ing reasons for your preference does not guarantee a place at your preferred school or mean that mission authorities can deviate from their published admission policies.									
Use	Use the space below to provide additional information to support your application for this school.									
 If you ticked the box above to indicate that the child has an older brother or sister (sibling) who will be attending this school, or the paired junior school, in the same school year that this application is for, fill in the sibling details below. 										
4)	Sibling first name:									
6)	Sibling surname:									
7)	Date of birth: DD MM YY									
8)	Sibling's home address and postcode (if different from child's home address in section 1):									
	9) Postcode:									

Section 6: Declaration

Please sign and date this form and return it to the address shown at the top of page 1. You must ensure the information you supply is accurate and correct. We reserve the right to require documentary evidence in support of your application to ensure fairness to all parents/carers. Examples of evidence which may be requested include a birth certificate, a copy of a court order, a solicitor's letter confirming exchange of contracts (and completion date on a new property), a rental agreement, a letter from an employer, a letter from a bank or building society, a utility bill or evidence of child's residency. We may also use data held within the council, for example council tax data, for the purposes of verifying an address. Please be aware that South Gloucestershire Council may withdraw an offer of a place where an application is proven to be intentionally misleading or fraudulent.

The information I give on this form is true.

Signature:	 								
Date: DD	MM	ΥY							

Data Protection Act 2018: This application will be held in the Admissions and Transport Team of South Gloucestershire Council for 7 years. It will be held securely as both manual records and as electronic files. This information may be shared with the Council in order to fulfil our overall strategic goals. It may also be shared with other statutory authorities and related professional bodies. This could include sharing information for the purpose of consultation and educated related issues. Should you wish to know more about how we look after your personal information please visit www.southglos.gov.uk/privacy