|  |  |
| --- | --- |
| **ADMISSION FORM – GUIDANCE DOCUMENT** | |
| **STUDENT DETAILS** | |
| **PLEASE PROVIDE COPY OF PASSPORT OR BIRTH CERTIFICATE** | |
| Student Legal Forename: (as per passport/birth certificate):  This is the name on your child’s birth certificate or passport – this must be correct otherwise GCSE certificates will be invalid in the future | Student Legal Surname: (as per passport/birth certificate):  This is the name on your child’s birth certificate or passport – this must be correct otherwise GCSE certificates will be invalid in the future |
| Preferred Forename: (if different to the above):  This is how your child would prefer to be known, maybe a name you call them at home | Preferred Surname: (if different to the above):  This is how your child would prefer to be known, maybe a name you call them at home |
| Middle Name(s): | |
| Date of Birth: | Gender: |
| Home Address: The address where your child lives most of the time | |
|  | |
|  | |
| Postcode: | |
| **FAMILY DETAILS** | |
| **PARENT/CARER – 1 – This is the person who we will call first in an emergency** | |
| Forename: | Surname: |
| Title: | Relationship to child: |
| Parental Responsibility: Any parent with the below box ticked ‘YES’ will receive all correspondence relating to the child  *Please tick* YES  NO | |
| Home Address if different to child: | |
|  | |
| Postcode: | |
| Home Phone:       Mobile: We send a lot of text communications so please add a mobile | |
| Work Phone: | |
| Email Address: EMAIL ADDRESS IS **MANDATORY** IF POSSIBLE AS MOST OF OUR COMMUNICATIONS ARE SENT OUT VIA EMAIL/TEX/ OR VIA OUR APP | |
| **PARENT/CARER - 2** | |
| Forename: | Surname: |
| Title: | Relationship to child: |
| Parental Responsibility: Any parent with the below box ticked ‘YES’ will receive all correspondence relating to the child  *Please tick* YES  NO | |
| Home Address if different to child: | |
|  | |
| Postcode: | |
| Home Phone:       Mobile: We send a lot of text communications so please add a mobile | |
| Work Phone: | |
| Email Address: | |
| **ADDITIONAL EMERGENCY CONTACT – 1 – PLEASE ADD ADDITIONAL CONTACTS, IN CASE OF EMERGENCY THIS IS VERY IMPORTANT IF WE CANNOT REACH A PARENT** | |
| Forename: | Surname: |
| Title: | Relationship to child: |
| Parental Responsibility:  *Please tick* YES  NO | |
| Home Address: | |
|  | |
| Postcode: | |
| Home Phone:       Mobile: | |
| Work Phone: | |
| Email Address: | |
| **ADDITIONAL EMERGENCY CONTACT -2** - **PLEASE ADD ADDITIONAL CONTACTS, IN CASE OF EMERGENCY THIS IS VERY IMPORTANT IF WE CANNOT REACH A PARENT** | |
| Forename: | Surname: |
| Title: | Relationship to child: |
| Parental Responsibility:  *Please tick* YES  NO | |
| Home Address: | |
|  | |
| Postcode: | |
| Home Phone:       Mobile: | |
| Work Phone: | |
| Email Address: | |

SIBLING DETAILS

Please list any brothers or sisters currently at Moor Park

|  |  |
| --- | --- |
| **NAME** | **DATE OF BIRTH** |
|  |  |
|  |  |
|  |  |

FREE SCHOOL MEALS

\*\* This is another important one, even if your child will not be having a school dinner, please apply, as this is additional funding for the school\*\*

\*Please see <http://www.lancashire.gov.uk/children-education-families/schools/free-school-meals/> regarding applying for free school meals. Even if your child will be going home for lunch, if you are entitled to a free school meal please apply, as they will be provided with lunch if out of school on a trip.

Please note: If your child’s name does not appear on the free school meal register supplied to us from the local authority we will not be able to provide your child with a free school meal.

**LUNCHTIME ARRANGEMENTS**

Please indicate your child’s lunchtime arrangements

School Meal  Sandwiches

|  |
| --- |
| **MEDICAL INFORMATION**  **Please fill out ALL the supplementary sheets where necessary** |
| Name of Doctor: |
| Address of Medical Practice: |
|  |
|  |
| Postcode: |
| Telephone Number: |

**ETHNIC BACKGROUND please indicate which is applicable by ticking the relevant box**

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture, ancestry or family history. **Ethnic background is not the same as nationality or country of birth.**

**White Asian or Asian British**

British  Indian

Irish  Pakistani

Traveller of Irish Heritage  Bangladeshi

Gypsy/Roma  Any other Asian background

Any other White background

**Mixed Black or Black British**

White and Black Caribbean  Caribbean

White and Black African  African

White and Asian  Any other Black background

Any other Mixed background

**Chinese**

Any other ethnic background  Please state:

|  |  |  |  |
| --- | --- | --- | --- |
| **First Language:** | This is the first language your child ever spoke/learned | **Religion:** |  |
| **Home Language:** | This is the language you speak at home |  |  |

**ADDITIONAL INFORMATION**

SPECIAL EDUCATIONAL NEEDS

Does your child have any special educational needs Yes  No

Does the child have an Educational Health and Care Plan (EHCP?) Yes  No

WELFARE

Have any of the following agencies been involved with your child?

Social Services  YOTS  Addaction  Young Carers  N/A

SCHOOL HISTORY

|  |  |  |  |
| --- | --- | --- | --- |
| **Current/Last School Name and Address:** |  | | |
| **Dates attended from:** |  | **To:** |  |
| **Reason for Leaving:** |  | | |

**I confirm I have given correct details to the best my knowledge and that I have read and understood the Privacy Notice (attached separately) and notes on Ethnic Background below.**

**Signature (typed):**       **Date**:

**Name (please print)**       **Relationship to child:**