



# Bedmond Academy Application Form

## In Year Admissions

- Before you fill in this form, please read the guidance documents and information on our website at <http://bedmondacademy.org.uk/>
- Supplementary Information Forms (if applicable) and any additional supporting documentation should be returned direct to the school.
- Please complete this form using black ink and CAPITAL LETTERS.
- **You must include two recent (within the last 3 months) forms of address evidence.** One must be a council tax bill, utility bill, solicitor's letter showing completion date or a signed tenancy agreement. Please do not send originals.

**We cannot process an application without evidence of your address.**

## Section 1: Your child's details

**Date place is required\*:**

\*Places are offered on the basis that they will be taken up within 10 school days. Please do not apply more than 4 weeks in advance of the date you require a place unless you are a service family.

### Your child's details:

First name	Middle name(s)	Family name/Surname
Date of birth	Current Year Group*	Female / Male

\*The Academy will allocate a place into the usual year group based on your child's date of birth. The Academy will not accept your child to be educated in a different year group to that indicated by their date of birth. However, if you feel there are extenuating circumstances you may complete the Application for Admission Outside of Normal Age Group attaching any evidence from professionals to support the case. Each case will be considered on an individual basis and a decision will be taken by the admitting authority which is Aspire Academies Trust.

<b>Your child's current address and postcode</b>	Current address
We check addresses and we will withdraw our offer of a school place if you give a false address	Postcode

<b>Your child's new address and postcode</b>	<b>If you are moving house, please provide the new address below:</b>
Date of move*	Postcode

\*Please ensure you enclose proof of your new address including the move date. This can be either a solicitor's letter confirming completion or a copy of the formal lease agreement. If you are moving to a rental property, please provide evidence that you have sold or are in the process of selling your previous property, or that a previous lease agreement has ended. We will not be able to take into account a new address without proof as referred to above.

## Section 2: Application details

<b>Does the child have a sibling at the school? * If yes, please give details below:</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Name:</b>	<b>Male/Female:</b>
	<b>Date of birth:</b>

\*A sibling is either the sister, brother, half brother or sister, adopted brother or sister, child of the parent/carer or partner or a child looked after or previously looked after and in every case living permanently in a placement within the home as part of the family household.

<b>Is the child you are making an application for in the care of the Local Authority (Child Looked After)?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate which local authority and include a supporting letter from the child's social worker and/or advisory teacher:	

<b>Was your child previously looked after but was then adopted or became subject to a child arrangements order or special guardianship order?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide supporting evidence including a copy of the adoption order if applicable	

<b>Are you or your partner UK service personnel or a crown servant?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please include an official MOD, FC or GCHQ letter showing relocation date	

<b>Your child's current school</b>	
School Name	School Address
Date last attended (if your child has left):	

### Section 3: Your details

<b>Name of person making the application</b> (Usually a parent/carer)	Title	Initial	Family Name
<b>Address if different to that given above</b>			
<b>Daytime telephone number</b>			
<b>Email address</b> Our preferred way to contact you			
<b>Your relationship to the child</b>			

<b>Is the child living with you under a private fostering arrangement?</b> This is where the child lives with an adult who is not a close relative i.e. not a parent, grandparent, sibling, aunt or uncle.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Do you have parental responsibility? *</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, please provide permission from the person(s) with parental responsibility confirming they are in agreement with the application.	

<b>Does another person(s) also have parental responsibility? *</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If yes, have they given agreement to the application being made?*</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>*For births registered in England and Wales, parental responsibility is automatically given to the child's mother from birth. A child's father will have parental responsibility if:</p> <ul style="list-style-type: none"> <li>• he was married to the child's mother when the child is born (even if later divorced or separated)</li> <li>• the child was born after 1 December 2003, and he is named on the birth certificate</li> <li>• if a parental responsibility agreement is obtained from a court or by agreement with the mother.</li> </ul> <p><b>Please provide a copy of any appropriate court orders or residence orders with this application.</b></p>	

## Section 4 : Healthcare data sheet

Please enter your child's details:

Surname		Forename	
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Date of Birth	
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Contact information:

Name	Relationship to child	Home Address, telephone, mobile, email

Medical information: (Please note that all medication must be in the original container as dispensed by the pharmacy).

<b>Medical diagnosis and condition (inc. allergies)</b>	
<b>Will your child have any medication in school? If so, please give details.</b>	
<b>Describe your child's medical needs and give details of symptoms of which you feel we should be aware</b>	

<b>How is your child's condition likely to affect them during the school day</b>	
<b>Daily care requirements</b>	
<b>Describe what constitutes an emergency for your child and the action to take if this occurs</b>	
<b>Are all your child's immunisations up to date (please tick)</b>	MMR Whooping Cough HIB Polio Diphtheria Tetanus

Doctor			
Address		Telephone	

Does your child have any specific dietary/religious requirements e.g. no pork YES/NO  
.....  
.....

We do use plasters in our school (**except where an allergy is stated above**) – please indicate below if you are happy for us to use plasters on your child.  
**I\We are happy for you to use plasters – YES / NO**

My child has Special Needs— please specify whether your child has problems with Speech & Language / Sight / Hearing / Developmental Delay / Behaviour Issues:		
Does your child have a Statement of Special Educational Needs?: please circle	Yes	No

## Section 5: Parental declaration

If you deliberately give false information, we may withdraw the offer of a school place.

**All of the information I have given on this form is correct and up to date.**

**I have read and understand the school's admissions policy.**

**I understand that you will inform my child's current school of this application**

**I understand that my child must be able to take up the allocated school place immediately and that the place may be withdrawn if not accepted within 10 school days.**

I confirm I have parental responsibility for this child and/or the agreement of all persons with parental responsibility

I enclose proof of address – **we cannot process the application without this.**

Your full name

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Your signature

	Date:	
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**It is very important that you include all necessary documentation and proof of your home address with your application in order to avoid any delays.**

Please return this application form to the office of:  
Bedmond Academy  
Meadow Way  
Bedmond  
WD5 0RD

*Upon receipt of your completed In Year Application Form and supporting documentation, we will process your Application and notify you whether or not we are able to allocate a place for your child at Bedmond Academy.*

*Once you have accepted the place, we will arrange for you to visit our school and we will require some additional forms to be completed together with a copy of your child's birth certificate or passport. We will also contact your child's previous school and ask them to complete a Part A Additional Information Form and return it directly to us.*