

St Michael's CE (VA) Primary School

King's Way Lyme Regis Dorset DT7 3DY

Tel. & Fax 01297 442623

Email: office@stmichaelslyme.dorset.sch.uk

School Admission Form

Child's Details

Child's Details						
Child's Legal Surname:	Child's Forename(s):					
Known as Surname:	Male/ Female	Date of Birth: / /				
(if appropriate)	ividic/i citiale	bate of Birtin.				
Current / Previous / School:						
Is your child currently attending school? YES/ NO						
, , ,	<u> </u>					
Address Details						
Current Address:						
		Postcode:				
-						
Future/Previous Address (if moving house):	:					
(Formated) Date of Marie		Postcode:				
(Expected) Date of Move:						
Please tick which address you would lil	ke your application to be con-	sidered from:				
We can only base your application on your						
Current address Future	address					
We aim to provide a school place wherever possible. However, there is no guarantee that you will get your preferred						
school. Even if you move into the catchment area the school may already be full.						
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Medical reasons (You must supply evidence	Social Reasons (Child p	rotection/ vulnerable child) 🗌				
Feeder School Distance Distance	Catchment Area Ability or Aptitude Testing	Sibling				
Religious (You must supply evidence)	Ability of Aptitude resting					
Other reasons for your preference:						
		(continue on a separate sheet if ne	ירסנכשעו			
		(continue on a separate sheet ii he	(CESSALV)			

Reason for changing school:				
				(continue on a separate sheet if necessary)
Date Place Required:				
Siblings Child with multiple birth siblings (twins, triplets etc)				☐ YES/ ☐ NO
Please provide details of any siblings and schools they are/will be attending NOTE: Siblings must be identified as having the same home address				
Child's Name:	Date of Birth:	/	/	School:
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Child's Name:	Date of Birth:	/	/	School:
Religious/Faith Reasons Are you involved with the life and worship of a church? If YES, please provide details of your vicar/priest/minister/leader: Vicar/Minister's Name: Address:				
Name of Church attended:		Deno	minat	ion:
Has your child been baptised/ christened?	YES/ NO			
Important: Please check the admissions policy for the school. The policy states clearly the evidence you need to in order for us to consider your application under religious/faith criteria.				
If this information is not received or endorsed, or is insufficient, your application will not be considered under these criteria, but will be considered under the next appropriate criteria.				
Child in (or previously in) Care These are children who have had a full or interim Care Order or children who are or have been accommodated under Section 20/22 of the Children Act 1989. This includes children who have been subject to an adoption, residence or special guardianship order.				
Is this application for a Child <u>currently</u> in Care? Is this application for a Child <u>previously</u> in Care? If YES , to which Local Authority:	YES/ NO			

Head Teacher: Mr. Nick Kiddle Website: www.stmichaelslyme.dorset.sch.uk

Does your child meet any of the following criteria	?				
Has been permanently excluded from school? Has had 15 days (secondary)/ 5 days (primary) or more days of fixed term exclusions from school? YES / NO Is attending Education Other than at School eg. a Pupil Referral Unit/Learning Centre? YES / NO If you have answered yes to any of the three questions above please provide further details:					
		(continue on a separate sheet if necessary)			
Has a multi against toom identified your shild's n	nade?	UVES / UNO			
Has a multi-agency team identified your child's no	eeasr	☐ YES/ ☐ NO			
Does your child have any disability of which a sch where adaptations to the school or specialist equ		☐ YES/ ☐ NO			
Is your child the subject of child protection issues	?	☐ YES/ ☐ NO			
If you have answered YES to any of the above please provide details:					
		(continue on a separate sheet if necessary)			
Is the Child's Parent/Guardian in the HM Armed F	iorcos?	YES/ NO			
is the Child's Farenty Guardian in the niw Armed F	orces:	1E3/NO			
Parent/Guardian Details This application must be completed by the parent who has care of the child for the majority of school days/weeks (unless a Court Order states differently).					
Mr/Mrs/Miss/Ms:					
Relationship to Child:					
Address (if different from child's):					
Tel No:	Mobile Tel No:				
Email address:					
Children in Care ONLY					
Details of Social Worker : Mr/Mrs/Miss/Ms:	Tel No:				
Details of carer : Mr/Mrs/Miss/Ms:	Tel No:				
Address (if different from child's):					

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Declaration:

You are only allowed to submit an application if you have parental responsibility for the child. If there is joint parental responsibility, this application must be discussed with everyone who has parental responsibility and a agreement reached for this form to be submitted. By submitting this application, you are confirming that you have sole parental responsibility for the child or that there is agreement between all persons who have parental responsibility.

You are confirming that checks can be made by the Local Authority if necessary to verify the information provided. You are accepting that the Local Authority reserves the right to withdraw school places which have been obtained by providing incorrect or misleading information.

You are also confirming that all details are correct to the best of your knowledge and that you have read the parents guide. If you do not have parental responsibility, do not submit this application.

Signature:

Date:

(If sending this form by email, please type your name in the signature field – this will act as your digital signature)

DATA PROTECTION ACT 1998

The information that you give on this form will be used by St Michael's CE VA Primary School for the purpose of processing your application for a school place & transport where appropriate for your child. The information will be shared with the Department for Education, as well as the schools, diocesan bodies and appeal panels which are directly involved in the application process. If applying for a school outside Dorset, it will be shared with the other local authority and schools in their area.

It will not be used for any other purpose unless required to do so by law. Should you have any queries about the Data Protection Act 1998, more detailed information is available on our website at www.dorsetforyou.gov.uk.

Please submit your form by doing one of the following:

Email to: office@stmichaelslyme.dorset.sch.uk

Post to: St Michael's CE VA Primary School

Kings Way Lyme Regis Dorset DT7 3DY

Please note: It is the parent/carer's responsibility to ensure that the completed application form and ALL supporting documents arrive safely. If you would like a receipt of your posted application form, please provide a stamped addressed envelope with this application. If you hand this in at the school you may wish to ask for a receipt.

Please contact the school office if you need this form in another format.

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