



Application Form

Request for a place on the waiting list

DETAILS OF CHILD APPLYING FOR A PLACE					
Surname					
First names					
Preferred name					
Nationality		Date of birth		Religion	
1st Language					
Details of other languages spoken					
Male / Female (please circle)					
Type of place applying for (please circle)	Baby Unicorns	Rising 3s	Unicorns' Nursery		
Please tick the days required for Baby Unicorns / Rising 3s / Unicorns' Nursery Please be advised that children are required to attend a minimum of 2 days in Baby Unicorns and 3 days in the Rising 3s and Unicorns' Nurseries					
	Mon	Tues	Weds	Thurs	Fri
Full Day (8:45am – 3:15pm)					
Early start (8am – 8:45am)					
Late stay (3:15pm – 5.30pm)					
Prep School (Reception – Yr 6)					
Senior School (Yrs 7 – 11)					
Proposed date of entry					
Proposed term of entry					
Have you registered your child's name at any other school(s) and if so, which?					



Please give details of any medical condition, health problem or allergy affecting your child (if applicable)

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Please give details of learning difficulty, disability, or special educational need of your child, as well as any behavioural, emotional and / or social difficulty of your child (if applicable)

NB: This includes whether a CAF or EHCP is in place

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Please outline any significant artistic, dramatic, musical or sporting skills / experience (if applicable)

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DETAILS OF PARENTS / LEGAL GUARDIANS

FATHER /Legal Guardian

Title (e.g. Mr)				
Full name				
Day-time telephone		Evening		Mobile
E-mail address				
Address (including postcode)				
Occupation				
Employer's business name and address				



MOTHER / Legal Guardian			
Title (e.g. Mrs, Ms)			
Full name			
Day-time telephone		Evening	Mobile
E-mail address			
Address (including postcode)			
Occupation			
Employer's business name and address			
OTHERS WITH PARENTAL RESPONSIBILITY			
<p>Please provide the name(s) and current address(es) of any other person with parental responsibility (i.e. legal responsibility) for the above named child. Their consent to the child attending the School will be required if an offer of a place is made.</p>			
Title			
Full name			
Address (including postcode)			
CONNECTIONS WITH THE SCHOOL			
<p>Please mention here the names of any other members of the family attending the School or registered for entry; or any other connection with the School.</p>			
How did you hear about Sancton Wood School? (please circle)			
Local reputation	Open Day	Friends	Advertisement
Website	Sibling(s) attend	Other (please specify)	



DETAILS OF CURRENT SCHOOL

Name, address and phone number of school

Dates of attendance

Name of Head

BURSARY AWARDS

Please confirm whether you will require a bursary award in order to meet the fee obligations if your child is offered a place at Sancton Wood School.

Please note, bursary awards are subject to a detailed financial assessment via an independent organisation.

You will be required to provide evidence of all financial incomings and outgoings and attend an assessment interview.

Bursary Awards are not available for places in Baby Unicorns, Rising 3s or Unicorns' Nursery.

Yes

No

Estimated level of Bursary Award required (% of fees)

G. P. DETAILS

Name, address and phone number of doctor with whom the above-named child is registered



NOTES

Early application is recommended. Applications will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the School at the time offers are made. A copy of the School's *Terms and Conditions* will be supplied on request.

DECLARATION AND SIGNATURES OF PARENTS/LEGAL GUARDIANS

	First parent / legal guardian	Second parent / legal guardian
Signature		
Name in full (please include all names)		
Relationship to child		
Date		

DECLARATION

I / We request that our child, named on this application form, is placed on the waiting list as a prospective pupil

I / We understand that the School (through the Head, as the person responsible) may obtain, process and hold personal information about me / us which may include financial information provided by me / us or by any licensed credit reference agency or information contained in any court orders, petitions or proceedings

I / We understand that the School may also obtain, process and hold personal information about our child which may include sensitive information such as medical details, and we consent to this for the purposes of assessment and, if a place is later offered, in order to safeguard and promote the welfare of the child

I / We enclose a cheque made payable to Sancton Wood School Ltd for £100 being the non-refundable Application Fee

Or

I / We have transferred the non-refundable Application Fee of £100 to the School Account

HSBC
 Sancton Wood School Ltd
 Account number: 71881604 Sort code: 40 05 20

On: (date)

Reference: