

SUPPLEMENTARY APPLICATION FORM

Priority C

To be completed by the School staff parent

Wansdyke Primary School is part of WellsWay Multi Academy Trust. The Governing body of the School is the admission authority and has responsibility for setting the admissions policy.

The Admissions Policy states that to satisfy **Criteria C** school staff are defined as those who are employed by the school for two or more years or where the member of staff is recruited to fill a vacant post for which there is a demonstrable skill shortage at the time of this application.

Once you have completed Part C please ask the Head Teacher to complete part D and then pass the form to the School Office by the closing date of 15 January.

You must in all instances complete a Local Authority Common Application Form and return it to the Local Authority by 15 January for it to be considered as on time.

| | | | |
|-----------------------------|--|--------|--|
| Child's Forename | | | |
| Child's surname | | | |
| Date of Birth | | Gender | |
| Name of parent/ Guardian | | | |
| Address & Postcode | | | |
| Phone number | | | |

PART D **To be completed by the Head Teacher**

Signed: _____ Name: _____

Date: _____

Please return this form to the School Office by 15 January.

In-Year Application Form

| | | | |
|--|--|--------|--|
| Preferred starting date | | | |
| Child's Forename | | | |
| Child's surname | | | |
| Date of Birth | | Gender | |
| Current Address | | | |
| Looked After Children | <p>Is this child 'Looked after' by a local authority? Y/N</p> <p>If yes, Local authority:</p> <p>Name of social worker:</p> <p>Contact phone number:</p> <p>Email address:</p> <p>Has your child previously been 'Look after'? Y/N</p> <p><small>If you tick yes, documentation will be required to support this. Please forward a copy of the Child Arrangements Order, Adoption Order, or Special Guardianship Order; together with a letter from the Local Authority that last 'looked after' the child confirming the child was in care of the Local Authority immediately prior to one of the above orders being granted.</small></p> | | |
| Parent/Carer Details | <p>Title: First Name:</p> <p>Surname:</p> <p>Relationship to the child:</p> <p>Do you have parental responsibility for the child? Y/N</p> | | |
| Current Address & Postcode (if different from child's) | | | |

| | |
|-------------------|---|
| Home Phone | |
| Mobile Phone | |
| Work Phone | |
| Email | |
| SEND Details | Does your child have an Education Health Care Plan (EHCP), extra support for their learning or any other additional needs? |
| Reason for moving | What is the reason for requesting a move to Wansdyke Primary School? Is there any other information that we should be made aware of? |
| Signature | I certify that the above information is true and accurate Date |

Please return this form to:

School Office, Wansdyke primary School, Whitchurch, Bristol. BS14 0DU

Tel: 0117 9030218

office@wansdykeschool.org.uk