

Secondary Common Application Form: September 2012

If you live in Plymouth and wish to apply for a secondary school place, read the Parents' Guide, complete this application form and return it by **Monday 31 October 2011 at the very latest** to either your child's primary school or Plymouth City Council at the address below. You may nominate up to three schools in rank order and give your reasons overleaf. If you nominate Devonport High School for Boys, Notre Dame RC School or St Boniface's Catholic College, as well as filling in this form you must also complete the school's Supplementary Information Form, available from the school or to download from the school admissions webpage. **Plymouth City Council reserves the right to withdraw the offer of a school place where an applicant has knowingly provided false or misleading information; and to share the information on this form within the Council and with other admission authorities.**

Name of child (block capitals please)

First name _____ Middle name _____

Surname _____ M F _____ Date of birth _____

Home Address (Normal place of residence) _____

Postcode _____ Tel No. _____

Current school _____

Please tick the box if the above named child has a Statement of Special Educational Need or is undergoing statutory assessment

Please tick the box if the child named above is in the care of a Local Authority

1st Ranked Preference School _____

2nd Ranked Preference School _____

3rd Ranked Preference School _____

The law requires that everyone with parental responsibility for a child can contribute to decisions about the education of the child. The Local Authority will assume that in signing this form you are saying that everyone who is entitled to participate in the decision agrees that this application should be lodged. It will also be taken that you have read the Parent's Guide.

Your name _____

Your signature _____ Date _____

What is your relationship to the child named in this application? _____

Does the child named in this application normally live with you? (refer to Glossary) Yes No

Please also complete the other side of this form and return it to the child's primary school (if in Plymouth) or direct to Services for Children and Young People, Plymouth City Council, Plymouth PL1 2AA. Telephone: 01752 307469

For each school nominated overleaf, please list below any older brothers or sisters who already attend the school. You may also give your reasons for nominating each school including any claim for exceptional medical or social need. Please continue on a separate sheet of paper if necessary.

Name your 1st ranked preference school here

Name any older brothers or sisters attending this school

Date of birth

Reasons for preferring this school

Name your 2nd ranked preference school here

Name any older brothers or sisters attending this school

Date of birth

Reasons for preferring this school

Name your 3rd ranked preference school here

Name any older brothers or sisters attending this school

Date of birth

Reasons for preferring this school

Please now check that you have signed and dated the form (overleaf) before returning it