|  |  |  |
| --- | --- | --- |
| Admission Date | Admission No. | Receipt confirmed |
|  |  |  |
| UCI Number | UPN Number |
|  |  |

 

**Fulford School** **(for office use only)**

|  |  |
| --- | --- |
| Surname (As stated on your Birth Certificate)  | **Forename(s)\*** Please underline the name by which you are usually known   |
| **Date of Birth** | **Female**  🞏 **Male** 🞏 |
| **Country of Birth ………………………………………………. Nationality ……………………………………………………………** |
| **Address**…………………………………………………………………………………………………………………………………………………………………...…………………………………………………………………………………………………………………………………**Post Code** ………………………….**Tel No** ………………………………………………………**Email**……………………………………………………………………………………………………  |
| **Resident Parent/Carer** (Dr/Mr/Mrs/Miss/Ms) | **Resident Parent/Carer**  (Dr/Mr/Mrs/Miss/Ms) |
| Surname Forename | Surname Forename |
| Address (if different to above) | Address (if different to above) |
| Relationship to Child | Relationship to child |
| OccupationMember of Armed Forces: Yes 🞏 No 🞏  | OccupationMember of Armed Forces: Yes 🞏 No 🞏  |
| Tel No. in case of illness or emergency | Tel No. in case of illness or emergency |
| Email Address: | Email Address: |
| Mobile: | Mobile: |
| **Non-Resident Parent in event of divorce/separation** | **Non-Resident Parent Partner** |
| Surname Forename | Surname Forename |
| Address | Address |
| Relationship to Child | Relationship to Child |
| OccupationMember of Armed Forces: Yes No 🞏 🞏  | OccupationMember of Armed Forces: Yes No 🞏 🞏  |
| Tel No. in case of illness or emergency | Tel No. in case of illness or emergency |
| Email Address: | Email Address: |
| Mobile: | Mobile:**(Please turn over)** |
| **Current GCSE subjects and predicted grades:** |
| **Please indicate your 3 preferred course choices and up to 2 further courses that you are also interested in (if you wish to take 4 courses, please put a \* next to the 4th course)** |
| **COURSE 1** | **COURSE 2** | **COURSE 3** | **OTHER COURSES** |
|  |  |  |  |
| ***Option blocks will be created in January 2021 and given out at the Taster Days. If you complete and return your application form by Friday 18th December, your choices will influence the option blocks.*** |
| **State whether Fulford Sixth Form is your 1st or 2nd preference application****Other Sixth Forms applied to**…………………………………………………………………………………………………………………………………. |
| **Previous Schools (most recent first)** |
| **Does your child receive any additional help in school?** Yes 🞏 No 🞏 If Yes please give details:- |
| **Does your child have any medical conditions that we should be aware of?** Yes 🞏 No 🞏 If Yes please give details:- |
| **Is there any special information regarding home background or child’s character/temperament which will call for care and attention?** Yes 🞏 No 🞏 If Yes please give details:- |
| **Do you have any access issues that we should be aware of eg wheelchair user, hearing impaired, that would prevent your desired involvement in your child’s education?** Yes 🞏 No 🞏If yes, please give details |
| **Does your child receive free school meals?**Yes 🞏 No 🞏  |
| **Would you like your child to be registered on the school’s Biometric Cashless Catering System?**Yes 🞏 No 🞏 If Yes I/We understand that I/we may withdraw my child’s registration at any time in writing. |
| **Mode of Travel to School (please tick)**Cycle 🞏 Walk 🞏 Car/Van 🞏 Taxi 🞏 School Bus 🞏 Car Share 🞏 Public Bus Service 🞏 Other 🞏  |
| **Ethnic Group: (please tick)**I do not wish an ethnic background category to be recorded 🞏White: British 🞏 Irish 🞏 Traveller of Irish Heritage 🞏 Gypsy/Roma🞏 White European 🞏White other 🞏Mixed: White and Black Caribbean 🞏 White and Black African🞏 White and Asian 🞏 Other mixed background 🞏Asian/Asian British: Indian 🞏 Pakistani 🞏 Bangladeshi 🞏 Any other Asian background 🞏Black/Black British: Caribbean 🞏 African 🞏 Any other Black background 🞏Chinese🞏Any other ethnic background 🞏Religion: ………………………………………………………………………………………………………Home Language ………………………………………………………………………………………….. |
| **Cultural and Religious considerations**: |
| **Interests**, e.g. Guides, Scouts, Sports, Musical instruments played etc |

If there is anything you wish to be kept confidential, please write personally to the Headteacher.

Signature of Parent(s) / Guardian(s) ………………………………………………………………… Date …………………………………………

Signature of Student ………………………………………………………………………………………. Date …………………………………………