

For office use only:		
Offered	No places	Waiting list
Refused	Refused FAP	Admission meeting
Additional comments:		
Authorised by: Date:		



Southchurch High School Application Form

Please ensure you read the Guidance Notes before completing the form

GUIDANCE NOTES:

Please use this form if you are moving into Southend on Sea, or are wishing to transfer schools during Years 7 – 11 and would like to apply for a school place at Southchurch High School.

The school is committed to working in partnership with parents/carers. We need to understand fully the academic history of your child in order that we can support them in the most appropriate way, it is therefore important that **all** sections of this form are completed in full.

Should you require help or advice with this please contact Ms Debbie Ellis (PA to the Admissions Team) on 01702 900777 or via email: admissions@southchurchschool.com

Part 1 (to be completed by parents/carers)

Section 1	CHILD'S DETAILS (Please print)																
Surname																	
Forename(s)																	
Date of birth	DD	MM	YYYY	Male		Female		Year Group									
Home address																	
											Postcode						
Current or most recent school and address of school																	
											Postcode						

If the child is not in school what educational arrangements are in place? Please provide additional notes if required.

YES ☐ NO ☐

YES ☐ NO ☐

YES ☐ NO ☐

PARENT / CARER

D		D	M	M	Y	Y	Y	Y
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Address
(if
different
from
child)

[illegible]

YES ☐ NO ☐

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YES ☐ NO ☐

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CHILD'S SIBLINGS

YES ☐ NO ☐

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Does your child have brother(s) or sister(s) attending Southchurch High School? YES ☐ NO ☐

Please provide details of siblings below:

Name:..... Date of Birth:..... Form / Year Group:.....

Section 4 ALL SCHOOLS ATTENDED

	DD	MM	YYYY	
	DD	MM	YYYY	
	DD	MM	YYYY	
	DD	MM	YYYY	

Please provide details of **all** Primary and Secondary schools attended:

Name of School	Town	Date started	Date left

Section 5 REASONS FOR APPLICATION

You must select one of the reasons below and provide supporting documents. Incomplete application forms will be returned.

Reasons for Application:		
a) Moving into the Southend area?	YES/NO	Moving Date: DD/MM/YYYY
b) Moving to a different address in the Southend area?	YES/NO	Moving Date: DD/MM/YYYY
c) Moving to Southend from Overseas?	YES/NO (if yes, which country?)	
d) Not moving but wanting a new school?	YES/NO	
For a), b) or c) please give your new address, your intended date of moving and attach to this form a copy of either a letter confirming exchange of contracts or a tenancy agreement (tenancies for a period of less than 6 months will not be accepted)		
For d) please give the reasons why you are seeking this transfer and confirm if you have discussed this with the current Headteacher		

Please provide information:

If you answer yes to any of the below, please ensure to provide a copy of the relevant documentation

Is your child looked after by a Local Authority or is your child previously looked after?	Yes		No	
If your child is adopted, or has a special guardianship order, or has a child arrangements order, after having being looked after by the state, please provide a copy of the order and the details of the Local authority. This also applies if the child was in state care abroad before being adopted.	Yes		No	
If yes, which Local Authority				
Please add your social workers name and contact details				
Is your child a member of a Service or Crown Family? Please provide letter from the MOD with details	Yes		No	
Please provide information				

Section 6 ADDITIONAL

This information is not used for the admission it is provided to support the placement at the school.

Does the child have an Education and Health Care Plan?	YES ☐	NO ☐
Is the child currently receiving SEN support in school?	YES ☐	NO ☐
Does the child have an Individual Support Plan (ISP)?	YES ☐	NO ☐
Does the child have an Early Help Assessment (EHA)?	YES ☐	NO ☐
If NO , has a EHA been initiated?	YES ☐	NO ☐
Is the child registered as disabled?	YES ☐	NO ☐
Has the child ever been in care (PLAC)	YES ☐	NO ☐

Has the current or previous school set up interventions to support your child? YES ☐ NO ☐

If you have answered **YES** to any of the questions above please give details below including a contact name and telephone number:

Is your child a young carer? **YES** ☐ **NO** ☐

If **YES**, please give details below:



DECLARATION

You will need to attach proof of address, a copy of the passport (if you are moving from overseas) and birth certificate as applicable before we can process this application.

Please note changing schools is a serious step to take and you must not remove your child from their current school before you have an offer of another school place.

Additionally, please be advised upon receipt of a Consent to Release Personal Information Prior to Admission form, signed by you, Southchurch High School will contact your child’s current or most recent school in order to obtain information regarding your child’s academic progress, attendance and behaviour record.

Please read carefully and sign.

1. I confirm that:
2. I agree to meet with staff at the School to discuss this application.
3. I am aware that the school may conduct checks to verify residency (e.g. request copies of two utility bills, council tax demand, home visits).
4. The information I have given on this form is true and correct.
5. I understand that if it is established that I have provided false or misleading information to the school in order to gain a place, the school will withdraw any place offered.

Signed:

Name:

(please print)

**Relationship to
child**

Date:

Once completed, this form, with supporting documents, must be returned to:

**Admissions Team
Southchurch High School
Southchurch Boulevard
Southend on Sea
SS2 4XA**

It can also be emailed to admissions@southchurchschool.com