

North East Lincolnshire Secondary Common Application Form 2022

For pupil's applying for a year 7 place, born between 1st September 2010 & 31st August 2011.

It is the parents/carers responsibility to ensure this form reaches the School Admissions Team by the closing date of **31st OCTOBER 2021**. Please ensure you ring / email to check.



(01472) 326291 (option 4)



schooladmissions@nelincs.gov.uk



www.nelincs.gov.uk



School Admissions Team, Knoll Street, Cleethorpes, North East Lincolnshire, DN35 8LN

Please complete this form if you pay your council tax to North East Lincolnshire Council. If you pay your council tax to another Local Authority (LA) please contact them to apply. Application forms from non-residents will **not** be forwarded to other LA's.

PARENT / CARER DETAILS

Parent/carer title Mr / Mrs / Miss / Ms	Parent/carer first name	Parent/carer surname
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Parent/carer relationship to pupil (Please tick)	Mother	Father	Foster Carer	Social Worker	Other – please specify
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Parent/carer address	Post code
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Contact telephone numbers

Contact e-mail

Please provide details of anybody else with parental responsibility who does not live at the above address – name, relationship to pupil, address, and contact telephone number.
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PUPIL'S DETAILS

Pupil's first names	Pupil's surname
Pupil's date of birth	Pupil's gender
Pupil's current school	

Please tick this box only if the pupil is 'looked after' / 'previously looked after' by the local authority.

A 'child looked after' is a person under the age of 18 who is provided with accommodation by a local authority, acting in its social services capacity, for a continuous period of more than 24 hours, by agreement with the parents or in accordance with section 22 of the Children's Act 1989. Previously looked after refers to those children who immediately after being looked after became subject to an adoption order, child arrangements order or specialist guardianship order including those who appear [to the admission authority] to have been in state care outside of England and ceased to be in state care as a result of being adopted. Children looked after under an agreed series of short-term placements (respite care) are excluded.

If your child is Looked after/previously looked after, please state the Local Authority whose care they are/where under.

- If you have any questions or concerns regarding your preferences, please contact the School Admissions Team before the closing date as they will be able to give you impartial advice and guidance on the process.
- Place your preferences as you would like them to be considered. You are given the option to apply for up to 3 preferences but if you wish to apply for only one or two that is your choice. However, if you do not receive any of your preferences, you will be allocated the next nearest school with places. Applying for the same school more than once will not enhance your chances of being allocated a place at the school.
- You are not guaranteed a place in a school because you put it down as your first preference. You cannot be considered for a school place if you have not applied for it.

Please complete your preferences over the page...

Write the names of the schools you wish to apply for under each preference, and then complete any criteria you think are relevant below each preference. The respective admissions authorities can only consider these reasons if they are part of the published admissions criteria. We recommend you read the individual school admission policies.

Preferences Minimum 1 Maximum 3		
First Preference	Second Preference	Third Preference
WRITE NAME OF YOUR 1 ST PREFERENCE IN THIS BOX	WRITE NAME OF YOUR 2 ND PREFERENCE IN THIS BOX	WRITE NAME OF YOUR 3 RD PREFERENCE IN THIS BOX

Catchment (Yes / No)	Catchment (Yes / No)	Catchment (Yes / No)
Feeder (Yes / No)	Feeder (Yes / No)	Feeder (Yes / No)
Distance / ease of travel (Yes / No)	Distance / ease of travel (Yes / No)	Distance / ease of travel (Yes / No)
Entance Exam Passed (Yes / No)	Entance Exam Passed (Yes / No)	Entance Exam Passed (Yes / No)

Sibling connections

If your pupil has older siblings who meet the criteria for your preferred schools please give details below (Name/ DB / School attending)

Children of Staff

If either of the parents/carers are members of staff at any of your preferred schools please state their name, relationship to the pupil, the name of the school, job title and start date of your employment below

Grimsby Town Pupil Development Program

If you apply for Oasis Academy Wintringham under this criteria please give the date below the pupil commenced on this program

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If you feel there are any other reasons that you would like to mention please attach to this form, with the name and date of birth of the pupil at the top in case it becomes detached.

Declaration / Information Sharing and Consent

If all the relevant sections have not been completed or if information is incomplete, the form will be returned to you, and this could delay your application. Therefore, please ensure you complete the form in as much detail as possible. **NOTE:** Where more than one person shares parental responsibility for a pupil, those persons should consult and agree. Only **ONE** form will be accepted for each pupil. In signing this form, you agree that the information provided is correct.

I understand that the information I have provided to North East Lincolnshire Council regarding my child and family will be recorded and used for the purpose of providing services, support, advice and guidance to my child and family. I agree to my family's personal information being processed and shared by North East Lincolnshire Council with appropriate partners and organisations to enable them to provide us with services, support, information, advice, and guidance in order to achieve a positive outcome for me and my family. North East Lincolnshire Council is the Data Controller for the processing of my personal information and that will process all personal information in accordance with the Data Protection Act and GDPR.

After reading the above please sign and date below. Any unsigned forms will be returned to parents/carer/social worker

Signature (Applicant) _____ Date _____

I am the parent*/carer*/social worker* * Please Delete as appropriate