

The Island Free School - Application Form

Submit An Application to Join Year 7 in Sept 2019 - Deadline for applications 31st October 2018

* Required

1. Child's forename(s) *

2. Child's Surname *

3. Address *

4. Postcode *

5. Date of birth *

dd/mm/yyyy

6. Contact phone number *

7. E-mail address *

8. Child's current school *

9. Do you wish your child to be assessed for special musical aptitude? *

Mark only one oval.

Yes

No

10. Does your child have a special educational need? **Mark only one oval.* Yes No**11. Does your child have a EHCP (Educational Health Care Plan)? ****Mark only one oval.* Yes No**12. Is your child in the care of the local authority? ****Mark only one oval.* Yes No**13. Title ****Mark only one oval.* Mr Mrs Miss Ms Dr Other**14. Forename(s) ***

15. Surname *

16. Relationship to child *

17. Address (if different from child)

18. Are you a founder of The Island Free School? **Mark only one oval.* Yes No

19. **Are you a qualifying member of staff at The Island Free School? ***

Mark only one oval.

Yes

No

20. **Does your child have a qualifying sibling at the school? ***

Mark only one oval.

Yes

No

21. **Name of sibling (if relevant)**

22. **I (we) confirm that all the information on this form is correct and that I (we) have parental responsibility for the child named in Section A. Where parental responsibility is shared with another person with whom the child does not ordinarily live, I confirm that I have made the person aware of this application. I (we) understand that The Island Free School reserves the right to verify the information that I (we) have provided and that any offer of a place based on false information will be withdrawn. ***

Mark only one oval.

Yes

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