

(Not to be used to apply for Private, Independent or Special Schools but you may indicate your intention on this form) FOR OFFICE USE
 Please attach additional paper if you need to write more information.

1st Preferred School CM SIB CF O

Reason for 1st ranked preference.

Name of sibling at 1 st School	Date of Birth	Year Group
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2nd Preferred School CM SIB CF O

Reason for 2nd ranked preference.

Name of sibling at 2 nd School	Date of Birth	Year Group
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3rd Preferred School CM SIB CF O

Reason for 3rd ranked preference.

Name of sibling at 3 rd school	Date of Birth	Year Group
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Declaration

In the event of your child not receiving an offer of a place at a preferred school, the Authority cannot be held responsible where a place was not offered because of an error made by you because you failed to read the Guide for Parents, Admissions to Secondary School Booklet 2025/26, available at <https://www.sheffield.gov.uk/schools-childcare/apply-school-place>

I declare that all the information I have given is correct and true.

SIGNED (Parent)

PRINT FULL NAME (Parent)

DATE

Day	Month	Year
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Please note: If a child is offered a place at a preferred school based on false or intentionally misleading information provided by you then the offer of the school may be withdrawn.

The **Admissions Committee** will consider supporting information from a professional and **may** prioritise your application for an oversubscribed school. It is your responsibility to send the documentation to the Admissions Team regarding additional information or change of address. If you are applying for **All Saints, Notre Dame or Parkwood** you must also submit the extra documents directly to each school.

Information contained in this form is personal data. It will be held on a computer and may be shared with schools and other services where necessary. The sharing of the information provided will then enable us to process your application. All information is subject to the Data Protection Act.