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**Application Form for use by Sheffield Residents only**

**To apply for initial admission into Primary school –2024/25**

**STUD I.D** Click or tap here to enter text.

**Pupil Details:**

 **First Name:** Click or tap here to enter text.

 **Last Name:** Click or tap here to enter text.

**Date of Birth** *(should be between 01/09/19 and 31/08/20)***:** Click or tap here to enter text.

**Gender (please delete as appropriate):**

**Male / Female**

**Address:**

Click or tap here to enter text.

**City:** Click or tap here to enter text.

**Postcode:** Click or tap here to enter text.

*If you are planning to move house, you must tell us, in the reasons overleaf. We may need to ask you for proof. The school your child is allocated will be based on your home address as at* ***31st January 2024***

**Current Pre-School Provider:**

Click or tap here to enter text.

**Is the child a Child in Care or Previous Child in Care (please delete as appropriate):**

**Yes / No**

if yes, it is important that you provide full details in the reasons section overleaf, so that the child’s application is correctly categorised - we may require proof of the circumstances.

*Note: Previous Children in Care are children who were in care, but who ceased to be so because they were adopted or became the subject of a Residence Order or a Child Arrangement Order or Special Guardianship Order immediately following being in care. If you are unsure if your child is a Child in Care or Previous Child in Care, please contact the Admissions Team*.

**If the child has an Educational Health Care Plan** you **must** apply directly to the SEN Team.

**Parent Details**

**First Name:** Click or tap here to enter text.

**Last Name:** Click or tap here to enter text.

**Relationship to child:** Click or tap here to enter text.

**Your telephone number:** Click or tap here to enter text.

**Your email address**: Click or tap here to enter text.

**Address**:

Do you live at the same address as your child (please delete as appropriate)?

**Yes / No**

If No, where do you live?

Click or tap here to enter text.

**Do you share parental responsibility with another person, who does not live with you (please delete as appropriate)?**

**Yes / No**

If you have answered Yes, please provide:

The name of this person: Click or tap here to enter text.

Their relationship to the child: Click or tap here to enter text

Their home address: Click or tap here to enter text.

Their telephone number or email address: Click or tap here to enter text.

By signing this form you are confirming that you have discussed the preferences made on this application form with the person named above, and that you both agree on these preferences.

We cannot process any application where there is a disagreement between parents.

**You must make sure that this form is received by the Admissions team no later than 15th January 2024.**

**You can return the form in different ways, but whichever way you choose, you will receive the outcome of your application by letter, to your home address on 16th April.**

**Attach to an email:** **ed-admissions@sheffield.gov.uk**

**Post to us: Admissions, Level 5: West Wing, Moorfoot, Sheffield S1 4PL**

**Hand deliver: First Point, Howden House, 1 Union Street, Sheffield S1 2SH –ask for a receipt**

**Please refer to the ‘Application Form Guidance’ before you make your application.**

You cannot use this form to apply for special schools (including integrated resources) or private or independent schools. Additional form(s) (SIF’S) will need to be completed for Voluntary Aided school preferences, and you must return those forms to each Aided school you apply for.

You mustmake sure you give the full reasons for your preference(s) on this application form - use additional paper if necessary (please put your child’s name and date of birth on any extra sheets). If a preference is later refused, and you appeal, an appeal panel can only consider the reasons you gave on your original application (for Key Stage 1 appeals). If there are exceptional medical or social reasons for applying for a particular school, and these reasons are confirmed and supported by a professional, an application may be prioritised by the Admissions Committee within its admission category. It is your responsibility to provide this supporting evidence to the Admissions Team, no later than 31st January 2024. Please contact Admissions if you require further advice, and read the Application notes for more details.

## Preferred Schools

**1st Preferred School**

Click or tap here to enter text.

**Reason for 1st ranked school - give full reasons:**

Click or tap here to enter text.

**Name of sibling at 1st School or Linked Junior School (or applying for a place):**

Click or tap here to enter text.

**Date of Birth of Sibling:** Click or tap here to enter text.

**Year Group:** Click or tap here to enter text.

Office use only:

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**2nd Preferred School**

Click or tap here to enter text.

**Reason for 2nd ranked school - give full reasons:**

Click or tap here to enter text.

**Name of sibling at 2nd School or Linked Junior School (or applying for a place):**

Click or tap here to enter text.

**Date of Birth of Sibling:** Click or tap here to enter text.

**Year Group:** Click or tap here to enter text.

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**3rd Preferred School**

Click or tap here to enter text.

**Reason for 3rd ranked school - give full reasons:**

Click or tap here to enter text.

**Name of sibling at 3rd School or Linked Junior School (or applying for a place):**

Click or tap here to enter text.

**Date of Birth of Sibling:** Click or tap here to enter text.

**Year Group:** Click or tap here to enter text.

Office use only:

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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 as a result of an error or omission made by you because you failed to read the information given on this application form and in the “A Guide for Parents, Entry into Primary School 2024/25” booklet, available at:

[www.sheffield.gov.uk/home/schools-childcare/apply-school-place](http://www.sheffield.gov.uk/home/schools-childcare/apply-school-place)

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

**SIGNED (Parent)**

**PRINT FULL NAME (Parent)**

Click or tap here to enter text.

**DATE**

Click or tap here to enter text.

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

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.