

KENT SECONDARY COMMON APPLICATION FORM 2020

For pupils applying for a YEAR 7 place born between 1 Sep 2008 and 31 Aug 2009



Please read the information below and ensure that you have read KCC's Admissions Privacy Notice at kent.gov.uk/privacy before completing this form. For more information read our guidance at www.kent.gov.uk/secondaryadmissions

Please Complete Sections in **BLOCK CAPITALS**

KENT BOROUGHES

To apply using this form you must pay your Council Tax to one of the following boroughs.

**ASHFORD ~ CANTERBURY CITY ~ DARTFORD ~ DOVER ~ FOLKESTONE & HYTHE ~ GRAVESHAM
MAIDSTONE ~ SEVENOAKS ~ SWALE ~ THANET • TONBRIDGE & MALLING ~ TUNBRIDGE WELLS**

If you pay your Council Tax to Medway, Bexley, Bromley, East Sussex, West Sussex etc you need to apply to them directly, *DO NOT USE THIS FORM.*

WHICH AUTHORITY DO YOU PAY YOUR COUNCIL TAX TO?

FURTHER INFORMATION

DOES YOUR CHILD HAVE AN EDUCATIONAL HEALTH & CARE PLAN (EHCP)?

If your child has an EHCP you should not apply for them using this form. Please contact their SENCO who will be able to advise you of how to apply for a School place.

YES	NO
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CROWN SERVANT

If you are UK service personnel or other Crown Servants living outside of KCC's Local Authority area with your family and intending to return for Sept 2020 intake, please tick YES. You will need to provide an official MOD, FCO or GCHQ letter declaring your relocation date and confirming your relocation address.

This must be sent to **Admissions, Room 2.20, Sessions House, Maidstone, Kent, ME14 1XQ.**

ARE YOU A CROWN SERVANT?

YES

NO

FUTURE ADDRESS IN KENT

DATE OF POSTING

DD / MM / YEAR

LOOKED AFTER CHILDREN

Children in Local Authority Care or Previously in Local Authority Care – a 'looked after child' or a child who was previously looked after but immediately after being looked after became subject to an adoption, child arrangements, or special guardianship order. A looked after child is a child who is (a) in the care of a local authority, or (b) being provided with accommodation by a local authority in the exercise of their social services functions (see the definition in Section 22(1) of the Children Act 1989).

DOES YOUR CHILD QUALIFY UNDER THE ABOVE STATEMENT?

YES

NO

If YES indicate in the LAC box overleaf

IF YES, WHICH AUTHORITY IS/WAS THE CORPORATE PARENT?

IF YES, PLEASE PROVIDE US WITH THE NAMES OF ANY PROFESSIONALS ASSOCIATED WITH THIS CHILD

PLEASE NOW COMPLETE THE DETAILS OVERLEAF AND RETURN TO:

Coordinated Admissions, Room 2.20, Sessions House, County Hall, Maidstone, ME14 1XQ

If you would like your form acknowledged please enclose a Stamped Addressed Envelope (SAE)
Or email your form to kentonlineadmissions@kent.gov.uk (please do not do both)

PLEASE RETURN TO KENT COUNTY COUNCIL BY THURSDAY 31ST OCTOBER 2019

Child's Details

Please Complete Sections in **BLOCK CAPITALS**

CHILD'S FORENAME	CHILD'S SURNAME	CHILD'S D.O.B	GENDER	LAC Y/N
CHILD'S ADDRESS		CHILD'S CURRENT SCHOOL		
POSTCODE		NAME		
		LA & DFE NUMBER		
		TOWN/POSTCODE		

Parent/Guardian Details

TITLE	PARENT FORENAME	PARENT SURNAME																																								
RELATIONSHIP TO CHILD	TELEPHONE NUMBER 1	TELEPHONE NUMBER 2																																								
EMAIL ADDRESS	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																																									

PREFERENCES – (Please read the below before completing your preferences). You can name up to 4 schools on this form (minimum 1 – maximum 4)

If you wish to add a reason for your preference please attach a separate sheet. Schools can only consider reasons that have a bearing on their over subscription criteria. Please check the school's admissions policy (kent.gov.uk/admissionscriteria) to see if they need any additional information directly from you. These comments will be sent on to the school and may not be read by KCC's Admissions Team. If you need to notify us of important information relating to your application please email kentonlineadmissions@kent.gov.uk

- Please check if your preferred school requires a Supplementary Information Form (SIF)
- If you are applying under Medical/Social criterion please provide written evidence directly to the school.
- If the child you are applying for has a Sibling attending one of your preferences please fill in Sibling details

PREFERENCE 1	PREFERENCE 2	PREFERENCE 3	PREFERENCE 4
SCHOOL NAME	SCHOOL NAME	SCHOOL NAME	SCHOOL NAME
LA & DFE NUMBER	LA & DFE NUMBER	LA & DFE NUMBER	LA & DFE NUMBER
TOWN/POSTCODE	TOWN/POSTCODE	TOWN/POSTCODE	TOWN/POSTCODE
SIBLING NAME	SIBLING NAME	SIBLING NAME	SIBLING NAME
DOB	DOB	DOB	DOB
GENDER	GENDER	GENDER	GENDER

Declaration By Parent/Guardian

I declare that the information I have given on this form is correct. I understand that if at a later date this information is found to be incorrect I may lose the place offered to my child.

The information collected on this form is to help arrange admission to school. It may be shared with colleagues in the Education Service, relevant schools and the Department for Education. The full data protection statement can be found in the Secondary School booklet.

I understand that when making an offer, the LA will ensure that a place will be offered at the highest available ranked preference a child is eligible for or if a place cannot be offered at any school named on the form, a place will be offered at an alternative school.

NAME	SIGNED	DATE
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