For School use	
□DoB checked	☐ Address checked
☐ Recorded	



Date received by school	HOPE COMMUNITY SCHOOL Application Form 2016/2017
	Reception Age (Pupils born between 1 September 2011 and 31 August 2012)

- You should complete **one** application form only
- Completed forms should be returned to Hope Community School
- The information provided will be used in accordance with the Data Protection Act 1998.
- Please read the guidance sheet carefully as you complete each section of this form
- The offer of any place at Hope Community School is conditional until we have a signed Funding Agreement
- You must attach a copy of your Council Tax bill and your child's Birth Certificate
- If you are applying for a faith based place please also complete a Supplementary Information Form and submit with this form
- Application forms should be submitted before the 15th January 2016.
- We will accept late applications and if we are oversubscribed we will place applications on a waiting list.

1. Child's Details (see guidance notes – sectio	n 1) PLEASE USE BLACK INK AND CAPITALS
Surname First i	name(s)
Please provide a copy of your child's birth cert	ificate
Gender Boy Girl	
Date of Birth	
Child's Full Home Address This must be the address where the child norm Parent/Carer's Address given in section 2 of the of paper. Please provide a proof of address.	-
Home address	
Postcode	
2. Parent/carer details (see guidance notes –	section 2)
Surname	First name(s)
Mr/Mrs/Miss/other	

Relationship to child Mother/father/guardian/carer/other
If other, please give details:
Home address
Postcode
Home telephone number
Daytime or mobile telephone number
Email address
3. School Preferences
School Name Hope Community School, Southampton
Post Code of School
Details of any siblings attending this school N/A
Sibling Name N/A
Date of Birth N/A
Reasons for Preference (Optional)
4. Children in Public Care/Looked After Children (see guidance notes – section 4)
Is the child, or has the child previously been, in the public care of a Local Authority (a 'Looked After Child')? Yes No
If YES, then please attach a letter from your Social Worker at the time you apply
5. Children with Special Needs (see guidance notes – section 5)
Does your child have a statement of Special Educational Needs or an Education, Health and Care Plan?

New Generation Schools Trust

If YES, then please give the name of the school named on the statement (if any) and the name of your case officer.

Declaration and signature (see guidance notes – section 6)

- I have, in completing this application form, taken into consideration the Application Form Guidance notes, including the reference relating to the Data Protection Act 1998.
- I understand that checks may be made to verify that the details I have stated on this form are correct. I also understand that if Hope Community School cannot verify the details I have stated, I may be asked to provide further documentary evidence.
- I understand I must advise Hope Community School, as soon as I am aware, of any change in my family circumstances that may affect the processing/outcome of this application.
- I/We wish to make application to the school listed in Section 3. I/We certify that I/we am/are the person(s) with parental responsibility for the child named in Section 1 and that the information given is true to the best of my/our knowledge and belief. I/We understand that any false or deliberately misleading information given on this form and/or supporting papers, or any relevant information withheld, may render this application invalid and could lead to the withdrawal of an offer of primary place for my/our child.
- I have completed the school's **Supplementary Information Form (if applicable)** and returned it to the school.

Signature of Parent(s)/carer(s)	[Date	
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The completed form and required evidence should be returned to:

TO BE COMPLETED