

**Etone College**

**Mid-Year Admission Application**

**Failure to complete this form in full will lead to a delay in your application**

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| **Child’s Information** | |
| **Child’s Forename:** |  |
| **Child’s Surname:** |  |
| **Date of Birth:** |  |
| **Current Academic Year:** |  |
| **Proposed Admission Date:** |  |
| **Gender:** |  |
| **Ethnicity:** |  |
| **Does your child speak English as an additional language?** | Yes/No  If yes, what is your child’s first language? |
| **Home Address:**  **Proof of address must be provided** |  |
|  | |
| **Parent/Carer Information** | |
| **Parent/Carer’s Forename:** |  |
| **Parent/Carer’s Surname:** |  |
| **Relationship to child:** |  |
| **Do you have parental responsibility?** | Yes/No |
| **Contact number:** |  |
| **Email address:** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Current School & Address:** | | |  | | | |
| **Pupil UPN No:**  **(available from current school)** | | |  | | |
| **Primary school attended:** | | |  | | |
| **Please list any previous schools with dates attended:** | | |  | | |
| **Why do you want to transfer your child to another school?** | | | | | | |
| **House move (within Warwickshire)** | **House move**  **(moving into Warwickshire)** | **Moving into Warwickshire from abroad** | | **Military family** | **Issues at current school (please detail below)** | |
|  |  |  | |  |  | |
| Issues at current school:-  (any issues should be discussed with your current school) | | | | | | |

**FOR COMPLETION FOR PUPILS IN YEARS 7-11**

**FOR YEAR 9, 10 AND YEAR 11 PUPILS ONLY**

**PLEASE LIST CURRENT SUBJECTS**

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| --- | --- | --- |
| **Subject** | **Course detail**  **(GCSE/BTEC etc)** | **Exam Board** |
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**FOR COMPLETION FOR ADMISSIONS INTO ALL YEAR GROUPS**

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| **Criteria** | | |
| Is the child in Public Care? (Looked After Child) | Yes/No | |
| Does the child have a Statement of Special Education Needs or Educational Health Care Plan? | Yes/No | If so, please provide details and evidence |
| Does the child have a sibling currently attending the school?  (sibling must attend when the application is made and must still attend the school at the proposed admission date) | Yes/No | |
| Sibling’s Name: |  | |
| Sibling’s Form Group: |  | |
| Is your child currently entitled to free school meals? | Yes/No | |
| Is your child pupil premium? | Yes/No | |

**FOR COMPLETION FOR SIXTH FORM STUDENTS (YEAR 12 & 13 ONLY)**

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| --- | --- | --- | --- | --- | --- |
| **Current Education Provider:** | | |  | | |
| **UPN No:**  **(available from current provider)** | | |  | | |
| **Secondary school attended:** | | |  | | |
| **Please list any previous schools with dates attended** | | |  | | |
| **Why do you want to transfer your child to another college?** | | | | | |
| **House move (within Warwickshire)** | **House move**  **(moving into Warwickshire)** | **Moving into Warwickshire from abroad** | | **Military family** | **Issues at current provider (detail below)** |
|  |  |  | |  |  |
| Issues at current provider:-  (any issues should be discussed with your current provider) | | | | | |

**YEAR 12/13 STUDENTS ONLY**

**To ensure you meet the entrance criteria, please detail course grades obtained below (evidence of these grades will be required)**

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| **Subject** | **Course detail**  **(GCSE/BTEC etc)** | **Grade obtained** |
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**YEAR 12/13 STUDENTS ONLY**

**Please detail the subjects you wish to study**

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| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |

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| **Any Additional Comments** |
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**Please note that Etone College opens a new waiting list each academic year and each term**

**It is parent’s responsibility to ensure their child remains on the waiting list into each new term, either in writing or via** [**admissions@etonecollege.co.uk**](mailto:admissions@etonecollege.co.uk)

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| **I, the parent/carer, confirm that:**   * **I have read and understood the In Year Admission form** * **I understand that should I not complete the form fully then my application may not be considered** * **I understand that a place may be lawfully withdrawn if it is proved to have been offered on the basis of a fraudulent or misleading application** * **I give my consent for the school to contact relevant agencies in order to validate this application.** * **I understand I have a duty to ensure that I notify/consult all other persons with parental responsibility for this child regarding this application and any subsequent changes to this application. Failure to do so will invalidate this application** * **I have provided valid proof of address** | |
| **Signed: (Parent/Carer)** |  |
| **Print Name:** | Mr/Ms/Miss/Mrs |
| **Date:** |  |
| **Office Use Only** | **Please return completed form to:**  **Mr I Smith**  **Headteacher**  **Etone College**  **Leicester Road**  **Nuneaton**  **CV11 6AA**  **Or by email: admissions@etonecollege.co.uk** |