



# ADMISSION FORM FOR BOVINGTON ACADEMY

Date of Admission:

Admission No:

**BOVINGTON**  
ACADEMY

**CONFIDENTIAL** (see footnote)

AN ASPIRATIONS ACADEMY

## A. INFORMATION ABOUT THE CHILD

1. **LEGAL** Name of the Child a) Surname: ..... b) Forename: .....

c) Middle Name (s): .....

Known As: .....  
(if different from above)

Boy

Girl

2. Date of Birth: Day ..... Month ..... Year .....

3. Child's Address .....

Post Code: .....

Temporary

Permanent

4. Names and ages of brothers or sisters: .....

## B. INFORMATION ABOUT THE CHILD'S PARENTS, OR PERSONS RESPONSIBLE FOR THE CHILD

5. **MOTHER** a) Title: ..... b) Name: .....

c) Address (if different from above) .....

Temporary  Permanent

d) Home Tel No: ..... Mobile No: .....

e) Place of Work: ..... Work Tel No: .....

f) e-mail address: .....

6. **FATHER** a) Title: ..... b) Name: .....

c) Address (if different from above) .....

Temporary  Permanent

d) Home Tel No: ..... Mobile No: .....

e) Place of Work: ..... Work Tel No: .....

f) e-mail address: .....

7. Name(s) of other person(s) having responsibility for the child **and whom the child lives:**

i) Name.....	ii) Name.....
Address .....	Address.....
.....	.....
Tel No's: .....	Tel No's .....
.....	.....
Relationship to child: .....	Relationship to child: .....

8. Who has parental responsibility for the child? *(please tick one box)*

a) Mother & Father	<input type="checkbox"/>	b) Mother	<input type="checkbox"/>
c) Father	<input type="checkbox"/>	d) Other Person(s)	<input type="checkbox"/>

If other, please state.....

**C OTHER HELPFUL INFORMATION FOR THE SCHOOL**

9. Neighbour or relative who could be contacted in an emergency (if parents not available):

a) Name and address.....  
.....

b) Contact telephone numbers: .....

If the school had to close in an emergency are you willing for your child to be sent home, even if you cannot be contacted?

Yes                      No

If no, please detail other arrangements that would be acceptable (eg sending child home with a friend):

.....

**10. PREVIOUS SCHOOL DETAILS**

a) Name: .....

b) Telephone No: .....

**11. MEDICAL DETAILS**

a) Name and address of family doctor: .....

.....

Telephone No: .....

- b) Any known allergies:.....
- c) Any other medical information of which the school should be aware? .....
- .....
- .....

**12. RELIGION**

- a) Please state child’s religion: .....
- b) Nationality: ..... Country of Birth: .....

**13. ETHNIC BACKGROUND** – please complete the Ethnic Background Record Form

- a) Mother Tongue – please study the list below and tick one box only to indicate the mother tongue (language) of your child.

Mother tongue is the language to which your child was initially exposed during early development. If your child was exposed to more than one language and these include English, then English should be taken as your child’s mother tongue.

Bengali	Cantonese	English	Greek
Gujerati	Hindi	Italian	Punjabi
Portuguese	Spanish	Turkish	Urdu
Other	Please specify .....		

*The information that you provide will help the school to ensure that all pupils have the opportunity to fulfil their potential. The statistics will not allow individual pupils to be identified. From time to time the information will be passed onto the Local Education Authority and the Department for Education and Skills (DfES) to contribute to local and national statistics and to enable effective monitoring of educational provision. The information will also be passed on to future schools, to save it having to be asked for again.*

**14. TRAVEL TO SCHOOL**

- a) Will you child normally travel to school by: Bicycle, Car, Walk *(please circle one)*

**15. SIGNATURE OF PARENT(S) OR PERSON(S) HAVING PARENTAL RESPONSIBILITY:**

..... Name: .....

Relationship to Child: ..... Date: .....

*Footnotes*

1. Parents or those responsible for the child are asked to inform the school if any of the details provided above change at any time in the future.
2. The details provided in this form will be available to the school office staff for appropriate record purposes and to the Head teacher and the teaching staff who are involved with your child.

