



APPLICATION FORM FOR A PLACE AT THE CARLTON INFANT ACADEMY.

Before completing this form parents are strongly advised to look at the admissions criteria on the academy's website www.thecarltoninfantacademy.org.uk

Please fill in this form using black ink and CAPITAL LETTERS

SECTION A

Full Legal Name:			
Date of Birth:		Gender (Male/Female):	
Current/Previous Schools:		Current School Year:	
Current/New Address:	Postcode:		
Previous Address (if applicable):	Postcode:		
Date of Move to New Address:			

SECTION B – BROTHERS OR SISTERS ALREADY ATTENDING OR APPLYING FOR THE CARLTON INFANT / JUNIOR ACADEMY

Full Name	Date of Birth	Gender (please tick)		Currently attending The Carlton Infant or Junior School (please tick)	Applying for a place at The Carlton Infant Academy (please tick, and specify which school)	
		Male	Female		Yes	No
Is the home address of the brother or sister the same as that in Section A?				Yes		No
If "no" please give full address:						
Postcode:						
Reason for different address:						





SECTION C – PARTICULAR CIRCUMSTANCES OF YOUR CHILD

Is your child 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 order, or special guardianship order including children who were previously in state care outside of England and who ceased to be in state care as a result of being adopted?	Yes		No	
If you have ticked yes, please name the local authority				

SECTION D – APPLICANT DETAILS AND DECLARATION

Full Name (include title, e.g. Mr, Mrs, Ms, Miss, other i.e. Dr, Rev – please state				
Relationship to Child:				
Do you have parental responsibility for this child? (please tick)	Yes		No	
Your Address (if it is different from your child's address listed on the front of this application, or you are moving house):	Postcode:			
Reason for different address, please give details here: You will also need to include evidence to verify your child's permanent address with your application.				
Telephone Numbers:	Home	Work	Mobile	
Email Address:				





SECTION E – REASON FOR APPLICATION

Children benefit from continuity of teaching and learning. If you have not moved house, please ensure that you have discussed this request with your child's current headteacher before submitting your application. If you still wish to transfer your child from one school to another, please indicate your reasons below. Any additional supporting written evidence stating why this transfer is in the best interests of your child should be attached to your application.

SECTION F – DECLARATION

1. I certify that the information given on this form is correct. I understand that a fraudulent or intentionally misleading application could result in any offer of a place being withdrawn.
2. I have checked that all those with parental responsibility are in agreement with this application.

Signature of Parent: _____ Date: _____

Please return this form to: Mrs M Sheppard Admissions Officer
The Carlton Infant Academy
Foxhill Road, Carlton
Nottingham NG4 1QS

YOU WILL BE NOTIFIED OF THE OUTCOME OF YOUR IN-YEAR APPLICATION BY, AT THE LATEST, A MAXIMUM OF 15 SCHOOL DAYS FOLLOWING RECEIPT OF THE APPLICATION.

