

Declaration of interest for admission to school

Please note: this document does not replace the official SCC application form required for entry into school.

Please refer to the current admission policy on the school website and SCC policy on <u>www.staffordshire.gov.uk</u> site.

| | Please circle year group: |
|---|---|
| Date of Birth: | Early Years Foundation Stage (Reception) |
| | |
| | Y1 / Y2 / Y3 / Y4 / Y5 / Y6 |
| | For: |
| Please attach a copy of their birth certificate. | 2024-2025 / 2025-2026 / 2026 -2027 /2027-2028 |
| | |
| Legal surname: | Legal forename(s): |
| Legar sumane. | |
| | |
| | |
| Religion: | Gender: |
| | |
| If your child has been baptised, please attach a copy of | |
| their baptism certificate. | |
| | Devente ef a con Cette die eleiteten eus in ite date in eleiteten |
| Date of Baptism: | Parents of non-Catholic children are invited to include a letter |
| | attached to their application form stating why they desire a |
| Place of Baptism: | Catholic Education for their child. |
| | Please tick if you are attaching a letter with this form. |
| Current address: | |
| | |
| | |
| | |
| | |
| Postcode: | |
| | |
| Parent 1 Name: | Parent 2 Name: |
| | |
| | Data (Dist) |
| Date of Birth: | Date of Birth: |
| (Please provide the full name of person with parental responsibility) | (Please provide the full name of person with parental responsibility) |
| | |
| Home telephone number: | Home telephone number: |
| | |
| Mobile telephone number: | Mobile telephone number: |
| | |
| | |
| Email address: | Email address: |
| | |
| Parent 1 address: (if different from above) | Parent 2 address: (if different from above) |
| | |
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Head Teacher: Mrs A Sherratt

Tutbury Road,, Burton-on-Trent DE13 0AJ Tel: 01283 247560 Email: office@st-modwens.staffs.sch.uk www.st-modwens.staffs.sch.uk

| Please provide names and dates of birth of any siblings in school: | |
|---|--------|
| /Year Group: | |
| /Year Group: | |
| | |
| Current or previous nursery/school name and address (if applicable): | |
| | |
| Please advise on any additional educational, behavioural or medical needs that your child has (for example; ref | errals |
| to outside agencies such as speech and language therapy, community paediatricians etc): | |
| | |
| Please note that applicants wishing to transfer in-year from a school within Staffordshire will need to complete a SCC in-ye | ar |
| transfer request form found on the SCC website www.staffordshire.gov.uk and this will require a signature from their cu | |
| Headteacher before an application is considered. By making this declaration of interest for a place in St Modwen's Catholic Primary School: | |
| 1 Juvich for my child to receive a Catholic Education | |
| I wish for my child to receive a Catholic Education. I understand that the details on this form will be held on a Computer Based Retrieval System, v | vhich |
| has been registered in accordance with the Data Protection Act. | |
| 3. I attach a copy of my child's baptism certificate (if applicable) and birth certificate. | |
| Signed:Date:Date: | |
| | |
| For School Use Only: Date form received: | |
| Baptism Certificate seen and copied: Yes No | |
| Birth Certificate seen and copied: Yes No | |
| Home address distance from school: | |
| Date of Admissions Committee meeting: | |
| Outcome: | |
| Place offered? Y/ N Date parents informed/ | |
| Pupil start date:// | - |
| Class: | |
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