

**Wednesfield Academy**Mid-Year Admission Application

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| **Child’s Information** |
| Child’s Forename |  |
| Child’s Surname |  |
| Date of Birth |  |
| Current Academic Year |  |
| Proposed Admission Date |  |
| Gender |  |
| Home Address |  |
| **Parent/ Carer Information** |
| Parent/ Carer’s Forename |  |
| Parent / Carer’s Surname |  |
| Contact Number |  |

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| **School Information** |
| Current Schools Address |  |
| Reason for Leaving Current School |  |
| Primary School Attended  |  |
| Please list any previous schools with dates attended |  |

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| **Criteria** |
| Is the child in Public Care? (Looked After Child) | Yes/ No |
| Does the child have a Statement of Special Educational Needs or EHCP?  | Yes/ No | If so, please provide details:  |
| 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 |  |

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| **Any Additional Comments** |
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| Signed: (Parent/ Carer) |  |
| Print Name | Mr/ Mrs/ Miss/ Ms |
| Date |  |

**Please note Wednesfield Academy opens a new waiting list each academic term.
It is parent’s responsibility to ensure their child remains on the waiting list into each new term.**

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| **Office Use Only** | Please return completed form to: Admissions ManagerWednesfield AcademyLichfield RoadWednesfieldWolverhamptonWV11 3ESOr by email: postbox@wednesfieldacademy.co.uk  |
| Date Received  |  |
| Autumn Winter |  |
| Spring  |  |
| Summer  |  |