To help us to care for your son/daughter in the best possible way we should be grateful if you would complete ALL sections of this form and inform school if your details change at any time.

SHERBURN HIGH SCHOOL ADMISSION FORM

**ADMISSION FORM** 

Surname Legal Surname (i.e. Surname which is on Birth Certificate)											ı	Male	/Fen	nale					
First Name											ı	Date	of B	irth					
Second Name										ı	Knov	vn A	s						
Third Name	)																		
Student's H	lome ad	dress										•							
Post Code							Home Telepho					hone No.							
cases of o	emerge of parer	ncy it i	may prov ardians' v	e ne work	cess place	sary fo e telep	or the so	cho umb	ol to contact pers/e-mails	Pare belov	ents/G w and	uardia update	ns o	durir nece	ng so	ry wh	nen c	hanç	ges a
ade. Pleas other	se prior	itise w	hich num	iber t	to ca	III first	t in an er	mer	gency (No. 1 Father	beir	ng firs	t conta	ıct, I	No.2	sec	ond o	conta	ct et	:c )
Surname			Forena	me				Surname			I	Forename							
Home Add	ress (if	differer	nt to that	of ch	ild)				Home Add	Iress	(if dif	ferent t	to th	at of	f chil	d)			
Post Code									Post Code										
OSI COGE							Priority		1 031 0000									—— Р	Priority
Home Tel No.					-		Home Tel No.												
Mobile No.							Mobile No.												
Work No.	1 1			1	1				Work No.		1		1	ı					
e-mail*									e-mail*								_		
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lame(s) of p	person(s	s) to wh	nom corre	spon	denc	e shou	uld be ad	ldre	ssed:										
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/hich medic																			
ne of Pract	tice	•••••			•••••						•	Tel. No	).						
child suffe	rs from													. req	uirin	g re	gular	trea	tmen

My child suffers from	which may require emergency. treatment
f your child uses an inhaler, please ensure	he/she always carries it with him/her at all times.
Is there any other illness / disability which may	Yes No
If so, please give details below:	, allest year orma o periormanos in esticor.
ii 30, picase give acialis below.	
Other children in household -	
Surname Forenames	Form at SHS Relationship to student being admitted
Attending SHS	
Other schools	
Please give details of any additional information	on which you feel may be helpful, e.g., dietary needs.
Please provide school with the following info	
Ethnic Group (e.g. White British, Asian etc.)	Transport to school (e.g. walk, bus, taxi etc.)
First Language	If travelling by bus please indicate bus number (if known)
Home Language	If either parent is in the Armed Forces please
Religion	specify which parent and which Service
National Identity	Is your child in receipt of Free School Meals?
Country of Birth	
Please take time to read the following on the	ne school website (www.sheburnhigh.co.uk/school policies)
Data Protection Act 1998	
<ul><li>Acceptable Use Policy</li><li>E-Safety Policy</li></ul>	
	ographs of the students at our school. We may use these images in our school twe produce, as well as on our website. We may also make video or webcam nonitoring, or other education use.
Certain aspects of the Data Protection Act 19 images of your child for school use.	98 require us to have your permission to take and store photographs of digita
* I give/do not give my permission for my child	I's photograph to be taken and used for school use
*I agree/disagree to the Acceptable Use Policy	y/E-Safety Policy (*please delete where appropriate)

Please return this form with ALL sections completed to Sherburn High School or e-mail it to transition@sherburnhigh.co.uk