



Southfield School

In-Year Admission Application Form

Applicants Full Name	
Applicants Date of Birth	
Year Group Applying for	
Address	
Postcode	
Parent/Carer Name	
Phone Number	
Email Address	
Current (or previous) school	
Does your child have a sibling link at Southfield School?	
Is the child part of multiple births? e.g. Twin	
Is the student a 'Looked After Child' (LAC) or 'Previously Looked After Child' (PLAC)?	
Is the student in receipt of an Education, Health & Care (EHC) Plan	
Is the student EAL? (English as an Additional Language) If yes, please list.	
Does the student have any additional needs	
Reason place applied for	Choose an item.
Additional info (e.g. has the student ever been permanently excluded or received a fixed-term exclusion from school; social worker involvement; court order in place)	
Last date of attendance at previous School (if applicable)	
Date place required from	
If no places are available in the student's year group, would you like their name added to the waiting list	