

School Admissions Service

Starting School (Year R) Application Form

2024

APPLY ONLINE at: www.bedford.gov.uk/onlineadmissions

If you are a parent or carer with parental responsibility, live within the area covered by Bedford Borough Council, and you would like to apply for a place at any infant, lower or primary school, you must apply online or complete this application form.

Please apply online or, if you use this form, return it to the School Admissions Service.

PLEASE COMPLETE ONE APPLICATION ONLY

If you live in another Local Authority do not complete this form. You **must** fill in your home Local Authority's application form and return it to them.

Please do this as soon as possible, and no later than **15 January 2024**. If you do not apply by this date, we cannot guarantee to consider your request.

Before you apply please read carefully the Starting School booklet at www.bedford.gov.uk/startingschool

If you need help in understanding or completing this form, or you need this information in another format, please contact the School Admissions Service (see page 4 for contact details).



If filling in this form electronically, please save the filled-in form and email to **admissions@bedford.gov.uk** as an attachment.

Or return the filled-in form by post to: School Admissions Service, Borough Hall, Cauldwell Street, Bedford, MK42 9AP

Section A: Pupil's Details

Please complete this form using BLOCK LETTERS, using BLACK INK

Pupil's Surname:		First Name(s):			
Pupil's Address at time of applicat	tion:				
	Date	e of Birth (1/9/19 to 31/8/20):			
		Gender (please tick): Male:	Female:		
	Name	of current school/nursery/pre-sch	ool and date admitted:		
Name of Parent or Adult with pare	ental responsibility:				
Title (Mr/Mrs etc):	Initials:	Surname:			
Relationship to Child:		Home Phone:			
Email Address:		Mobile Phone:			
Please note that any offer made will be withdrawn if we find that the parents have given false information.					
Section B: School Preferences					
This part of the form relates only to maintained schools. You may nominate up to three preferred schools. One of these would normally be your catchment school (if applicable).					
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If a place cannot be offered for my child at any of the schools I have listed above, I wish my child to be considered for a

place at my catchment area school.

^{*} If you do not want your child to be considered for a place at the catchment area school, please delete the sentence above.

Section C: Other children

If you have an older child who, at time of admission, will still be attending one of the schools you have nominated, please give details below:

Name: Date of Birth: School attending:

Name: Date of Birth: School attending:

Section D: Other Information

(See booklet, Other Information i) to iv)

Please tick Yes No

- i. Does your child have an Education, Health & Care Plan (EHCP)?
- ii. Is your child a "looked after" or previously "looked after" child? (See booklet for definition)

Name of Authority: Date the child became 'Looked After':

Name / Contact details of the Social Worker:

- iii. Does your child have "exceptional" medical grounds why she/he should be given priority of admission to one of the schools in Section B? (See booklet for definition)
- iv. Does your child have a parent/carer who works at any of the schools in Section B? (If yes, please give details below)

Additional Information

Please use this box for the information required in Section D plus any additional information to support your application. If necessary, please continue on a separate sheet.

Declaration

I confirm that the information given on this form is correct and that I have read the admissions arrangements and understood the way in which places are allocated.

I agree to provide the School Admissions Service with information regarding my child's address, upon request, as part of their verification process. (See Pupil's Details in the booklet.)

Name of Parent or Adult with parental responsibility: Signature of Parent or Adult with parental responsibility:

If you are applying for a place at a school on religious/faith grounds, please complete Section E and/or Section F.

If you have any questions about the admissions arrangements, please contact:

School Admissions Service, Borough Hall, Cauldwell Street Bedford MK42 9AP

Telephone General Enquiries Line: 01234 718120

Fax: 01234 228846

Email: admissions@bedford.gov.uk



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Data Protection

Under new Data Protection regulations (GDPR) Bedford Borough Council needs to inform you of the reasons why we are capturing your data and what we will do with your data. Any personal data collected and/or processed under this policy/procedure will be dealt with in accordance with Data Protection Legislation and the Council's Data Protection Policy. Data is held securely and accessed by, and disclosed to individuals only where relevant to this policy/procedure. To find out more information on this follow the link below.

View the Council's current Privacy Notices at www.bedford.gov.uk/gdprprivacy

Section E: Applications to Church of England Schools only

If your application for a place at any of the following **Church of England Schools** is on **religious or faith grounds** you **must** make sure that your priest, minister or faith leader confirms, by signing the declaration below, that you meet the religious criterion for the school.

You **must** refer to the school's prospectus or website for details of the admissions criteria so that he/she can confirm that you meet any attendance requirements.

This is particularly important as these schools may have a variation to their religious criterion as a result of places of worship being closed during the Coronavirus pandemic.

- Christopher Reeves Primary School
- Great Barford Primary School
- Ravensden Primary School
- · Riseley Primary School

School(s) (see list above):

- Roxton Primary School
- St. Lawrence Primary School
- Wilden Primary School

If you do not supply the required evidence of faith affiliation we will not be able to process your application under the faith criteria.

Pupil's Surname:	First Name(s):	
Address:		Date of Birth:
Declaration by Priest, M	linister or Faitl	n Leader
I confirm that:		
Name of Parent(s) or Adult(s) with parental responsibility	ty:	
Is a member / practising member of this cong below) and meets the criteria for admission to		(please complete
Name of School:	Name of Congregation / Place of Worship:	
		F.
Name and Address of Priest, Minister or Faith Leader:		
	Signature of Priest / Minister /	Faith Leader:
Christian denomination or religious faith	Date:	
Christian denomination or religious faith:	Dute:	

Section F: Applications to Catholic Schools only

If you are applying for a place on religious grounds at the following **Catholic schools** because you are a practising Catholic family, your priest **must** confirm this, by signing a **Certificate of Catholic Practice**. This is a new requirement from the schools within the Our Lady Immaculate Catholic Academies Trust. The blank Certificate can be obtained from the schools or downloaded from our website, **www.bedford.gov.uk/onlineadmissions**.

If you are applying because although you are not a practising family, your child has been baptised Catholic, or enrolled in a catechumenate programme, you **must** provide their Baptismal Certificate or your priest **must** confirm enrollment in the programme by signing the declaration below.

If you are applying because you a practising member of another religion or faith you **must** make sure that your priest, minister or faith leader completes the declaration below to support your application.

Please refer to the relevant page of the starting school booklet for the admissions criteria for:

• St. John Rigby Primary School

School(s) (see list above):

• St. Joseph's & St. Gregory's Primary School

If you do not supply the required evidence of faith affiliation we will not be able to process your application under the faith criteria.

Pupil's Surname:	First Name(s):				
Address:			Date of Birth:		
Baptismal Certificate MUST be attached (please tick):	Yes:	No:			
Declaration by Priest, Minister or Faith Leader					
I confirm that:			Please tick		
 This child is not baptised but is enrolled in a co I support this application 	atechumenate p	rogramme			
Name and Address of Priest, Minister or Faith Leader:	Name of Congregation / Place of Worship:				
	Signature of Prie	st / Minister / F	aith Leader:		

Date:

Christian denomination or religious faith: