## **BURLINGTON DANES ACADEMY**

## ARK SCHOOLS "IN-YEAR" STUDENT APPLICATION FORM

SECTION 1

Legal Family Name	STUDENT DETAILS									
Legal Forename										
Middle Name(s)										
Date of Birth	1 1			Gender	Male	0				
	Day Month	Year			Female	O				
School Year Applying For	Year 7	Year 8	Yea		Year 10	Year 11				
-	0	0	0		0	0				
Home Address										
	Postcode:	Borou	gh of Residence	:						
	Is this a permanent address									
Do you have any other children currently attending Burlington Danes Academy?	Provide name(s)		]	Date of Birth(s)						
		PARENT/ CARE	1							
Name of Parents/Carers (Complete 1 block per parent/ carer)	nplete 1 block per parent/ First Name Family Name					Mr / Mrs / Ms / Miss / Dr  First Name Family Name				
Home address (if different from above)										
Relationship to student										
Home Telephone										
Work Telephone										
Mobile										
Email										
		PREVIOUS ED	UCATION	I						
If educated abroad, when did your	r child commence education i		/ Month Year							
School(s) Last Attended (state Cou	untry if not in UK)	From	То	Type of Scl eg Primary	hool //Secondary	Reason for leaving/ seeking transfer				
Name										
Address		1 1	1 1							
Name										
Address		1 1	1 1							

S	OCIAL NEE	EDS					
Children in Public Care (please provide a letter from a social worker confirming this information):							
Is the child in the care of a local authority?	No	0	Yes	0			
If yes, please state which local authority							
Children with Special Educational Needs:							
Does the child have a statement of Special Educational Needs  If yes, you should NOT complete this form, and should the statement of Special Educational Needs		O Local Autho	Yes ority.	0			
APPLYING FOR A PLAC	CE AT BU Applying. Please				NES ACAI	DEMY	
If you have recently moved to London from abroad							0
If your child has been attending an Independent fee paying school and you prefer him/ her to receive a state education							0
If your child is attending a school but you want to move him/	her to a differen	nt school					0
If you have moved recently to this area							0
If your child is being educated at home and you would like him/ her to return to state education							0
If your child has been permanently excluded from a school							0
If your child is currently attending an alternative educational provision							0
	DECLAR	ATION					
I certify that I have parental responsibility and am the main carer for of my knowledge. I understand that if I have knowingly given false of might render this application invalid and lead to the withdrawal of an	or misleading info	rmation on th	is form o				
Parent / Carer Name:		Parent / Care	er Signat	ure:			
Date:							
Please return this form with all supporting documents to:							
Ms Polly Rees, Admissions Officer, Burlington I	Danes Acade	emy, Wood	dlane, \	White	City, London W	12 ohr	
For Internal Use Only:							
Year Group:	References:	Yes O	No (	0	Requested O		
Date Application Received:	Distance:				Sibling: Yes O	No O	
Notes:							

Please give the reasons for making this application including any relevant background information. Continue on a separate sheet if necessary.
ARK Schools and the academy will handle the information you have provided in line with the Data Protection Act (DPA) and it will only be used for schoo admission purposes. In order to verify some of the information you have provided a request for information may be made to other bodies such as the Local Authority e.g. Council tax records. Under the DPA you have the right to make a formal written request for access to personal data held about you o
your child.

Reason(s) for making this application