

## Application for Admission to Reception 2026-27

You should complete and return this application by

15 January 2026

| For School Use Only                               |
|---|
| Has the DOB been checked?                         |
| YES NO  |
| Does the form nominate preferences?               |
| YES NO  |
| Is the form signed by the person with P.R?        |
| YES NO  |
| Has a receipt been issued?                        |
| YES NO  |
| Please upload forms individually – not in a batch |

## **Important Notes**

Postcode:

Do you know that you can apply online using the Council's ON LINE SYSTEM <u>www.stoke.gov.uk/admissions</u> This will enable an automatic receipt to be issued to you.

- You are strongly advised to refer to the Information for Parents Booklet/Prospectus prior to completing this application form. You may view this at www.stoke.gov.uk/admissions
- You are strongly advised to obtain and read a copy of each School/Academy's Admission Policy
- If you want to apply for Schools/Academies in another authority you will need to put the details of those Schools/Academies on this application form
- Please return this form by the closing date of **15 January 2026** to your current STOKE-ON-TRENT Primary or Junior Academy/School. (Please ask for a receipt as proof of application)
- If your child attends another authority Primary or Junior School/Academy, please return this form directly to the address in bold below. (You may wish to use registered post to ensure delivery proof of posting is not proof of delivery)
- If you move address before 16 April 2026, you <u>must</u> contact The Admissions and Transport Team to inform them of your new address - Proof of address WILL be required. By post to: Admissions and Transport Team, Civic Centre, Glebe Street, Stoke-on-Trent, ST4 1HH or by email to admissions@stoke.gov.uk

Is this child in the care of a local authority? Yes: No: If yes, the person with Parental Responsibility must complete this form. Section 1 - Child's Details Date of Birth: Child's First Name: (Print Name) Child's Surname: (Age Range 01/09/21 - 31/08/22) (Print Name) Male: Female: (Please Tick) Child's Current School: Do you have parental responsibility for this child? (This box must be ticked in order to process) Yes: No: Parent/Guardian: (Print Name) Mr/Mrs/Miss/Ms (Please Circle) Relationship to child: Parent/Guardian: (Print Name) Mr/Mrs/Miss/Ms (Please Circle) Relationship to child: Full Postal Address: Stoke-on-Trent

NB: it is your responsibility to advise The Admissions and Transport

Team immediately if these details change. Please email

admissions@stoke.gov.uk

| Phone Number: (Mobile)   |  |  | (Home/Wor                        | <u>'k)</u>                   |                   |                |  |
|--|--|--|----------------------------------|------------------------------|-------------------|----------------|--|
| E-mail address:  |  |  |                                  |                              |                   |                |  |
| Has your child previousl but has now been adopt  |  |  | Ye                               | es:                          | No:               |                |  |
| Does this child have an Statement of Special Ed  | Ye   | es:  | No:                              |                              |                   |                |  |
| Preference for Catholi   | ic and Church (A   | ided) Schools/A  | cademies                         | only                         |                   |                |  |
| If you are applying for fa<br>Schools/Academies, pla<br>need to provide further  | ease be aware tha  |  |                                  |                              |                   | ou <b>will</b> |  |
| Religion of Child:   |  |  | Has your                         | child been Bap               | tised?            |                |  |
| Failure to supply furth  | ner information m  | nay effect the ad  | missions                         | category the                 | child is plac     | ed in.         |  |
| Section 2 – Reception  | n School Prefere   | ences  |                                  |                              |                   |                |  |
| List the <u>names</u> of Schools reasons for your preference You are strongly recommendations.   | ces below. (Please   | attach an additiona  | I sheet if re                    |                              | d order. You n    | nay give the   |  |
| 1 <sup>st</sup>  |  |  |                                  |                              |                   |                |  |
| 2 <sup>nd</sup>  |  |  |                                  |                              |                   |                |  |
| 3 <sup>rd</sup>  |  |  |                                  |                              |                   |                |  |
| 4 <sup>th</sup>  |  |  |                                  |                              |                   |                |  |
| 5 <sup>th</sup>  |  |  |                                  |                              |                   |                |  |
| Reasons for preference - Including Medical/Social (evidence MUST be attached). Any evidence sent separately from this form must be sent by registered post or e-mail. Proof of posting is not proof of receipt.  |  |  |                                  |                              |                   |                |  |
| Section 3 – Elder Bro  | other or Sister  |  |                                  |                              |                   |                |  |
| If your child has an elder that attendance in September  |  |  | preferred S                      | chools/Academ                | ies, who will s   | till be in     |  |
| Name of Elder Brother of   | or Sister Prim   | ary School/Acade   | emy                              | Date of Birth                | Curren            | t Year         |  |
|  |  |  |                                  | / /                          |                   |                |  |
| Section 4 – Declaration and Signature of Parent/Guardian   |  |  |                                  |                              |                   |                |  |
| Parent/Guardian Declaration Applications cannot be proceded in declare that all the information intentionally misleading applied. Where I have applied for faindividual school policies for the parents of the procedure in the pro | essed without an approion I have provided is ication from Parent/Guith school/s, I am aw | opriate signature.<br>true. I understand th<br>uardian the offered pl<br>vare I must send rele | at if a place i<br>ace will be w | is offered on the lithdrawn. | pasis of a fraudu | lent or        |  |
| Signature:   |  | Signatu  | re:                              |                              |                   |                |  |
| Date:/   | /  |  |                                  |                              |                   |                |  |



At Stoke-on-Trent City Council we take your privacy seriously and will only use your personal information to fulfil the Authority's statutory and operational needs in relation to school admissions and for purposes required or allowed by law. The information supplied by you is securely held on the Capita ONE database and is used by both City Council staff and those working in schools. Information may be shared with North Staffordshire Primary Care Trust for the purpose of updating and maintaining school nurse records. It may also be shared with local schools so that 'school readiness activities' can be offered to your family. If you have any objection to this information being shared, please write to:

The Admissions and Transport Team, Children and Family Services, Floor 2, Civic Centre, Glebe Street, Stoke-on-Trent, ST4 1HH.

You should be aware that we have a duty to protect public funds. We may therefore use the information with other bodies for these purposes. We may also