## Form SA1

Starting school – September 2024

Personal information - child's details



Please read the "Starting school in Westmorland & Furness – September 2024" booklet carefully before you complete this form. The booklet is available in schools and on the county council website at <a href="https://www.westmorlandandfurness.gov.uk">www.westmorlandandfurness.gov.uk</a>. Please return your completed form to your preferred school by 15 January 2024.

Child's first name														
Child's surname														
Date of birth  Home address								Gender (male/female)						
Home address									Postcod					
Cu	rrent Nursery													
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	arent/carer deta	ils								<u> </u>				
Full name of parent/carer							Title (Mr	/Mrs/Ms/Mis	ss etc)					
Re	lationship to child	d												
Со	ntact tel number	_												
Со	ntact email addre	ess												
l g	ive consent for al	l corre	espo	nden	ce to l	be se	ent to				V □	No 🗆		
<i>(</i> -,								this 6	email	address	Yes	No 🗌		
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Are you applying for any of your schools on	the basis of faith?	Yes 🗌	No 🗌						
If yes, which faith?									
Please check to see if you need to complete a supplementary form or send any supporting information to your preferred schools. This information can be found in the "Starting school in Westmorland & Furness - September 2024" booklet.									
If you have attached any evidence, please	tick this box								
Does your child have an Education, Health	and Care Plan (EHCP)?	Yes 🗌	No 🗌						
Is your child currently undergoing a statutor educational need?	ry assessment of special	Yes 🗌	No 🗌						
Do you have any other children attending a schools who have an EHCP which names t		Yes 🗌	No 🗌						
Is your child in the care of a Local Authority	?	Yes 🗌	No 🗌						
If yes, which Local Authority?									
Was your child previously looked after by a	Local Authority?	Yes 🗌	No 🗌						
If yes, please refer to pages 10 and/or 13 of the "Starting school in Westmorland & Furness - September 2024" booklet for further information.									
If you have attached any evidence, please	tick this box								
Community and voluntary controlled sca Do you have any other children attending a schools who were directed to that school by (please see criterion 3 the Local Authority A further information)	ny of your preferred y the Local Authority.	Yes 🗌	No 🗌						
Other reasons for your preferences  If you wish to give any other reasons for your preferences, please attach a separate sheet. If you have attached any additional information please tick this box									
Parental declaration I confirm that I have parental responsibility for this child and the information given is correct. I understand that if I have given false information, any school place offered may be withdrawn. I also agree to whatever checks may be carried out to verify accuracy. I have read the "Starting school in Westmorland & Furness - September 2024" booklet provided by Westmorland & Furness Council before completing this form									
Full name of parent/carer signing the form (please print)									
Signed									
Date									
Correspondence address if different from child's address (this address will not be used in the allocation process)									

Remember to submit your form by 15 January 2024 – if your form is late, it may affect your chances of being allocated a place at one of your preferred schools

Information about School Admissions can be found on Westmorland & Furness Council's website at: <a href="mailto:www.westmorlandandfurness.gov.uk">www.westmorlandandfurness.gov.uk</a> or by contacting <a href="mailto:school.admissions@westmorlandandfurness.gov.uk">school.admissions@westmorlandandfurness.gov.uk</a> or 0300 303 8144.