

(Cornwall Admissions) Common Application Form (CACAF)

Please note that you need to read the guidance notes before completing this form.
Please use a black pen to complete this form and print in block capitals.

If one or more of your preferred schools is a Voluntary Aided (church) school, you should contact that school to find out whether any additional information is required.

Surname of child:..... First name(s) of child:.....

Date of Birth:..... BOY GIRL (Please tick as appropriate)

Current address of child:.....

.....

Postcode:..... Parent/carer's e mail address:.....

Tel. Nos. Home:..... Daytime:..... Mobile:.....

If you are moving to a new address please give your proposed address below:
(Please note that evidence of your proposed address may be required before a place can be allocated)

Proposed address:.....

.....

Postcode:..... Moving Date:

Does your child have a statement of special educational needs? YES NO

Is your child in public care ("looked after" by a Local Authority)? YES NO

(Please tick as appropriate)

If "Yes", which Local Authority?.....

Name of child's current school:.....

Has your child been permanently excluded from a school? YES NO

(Please tick as appropriate)

If "YES", please name the school(s) where the exclusion(s) occurred and the date(s) of the exclusion below:

School:..... Date:.....

Signature of applicant: (you must have parental responsibility for the above-named child):

..... Date:.....

Name in Block Letters:

.....(Mr/Mrs/Miss/Ms//Dr/Other)
(Please delete as appropriate)

Relationship to child:.....
(mother/father/carer, etc.)

Date:.....

PTO

I would like my child to be allocated a place at the following school:

Name of first preference school:		For office use only
Please name any brothers or sisters who will be attending this school:	Date of birth:	
.....	
.....	
Reasons for preferring this school (additional information may be attached on a separate A4 sheet):		

If my child does not qualify for a place at my first preference school, I would like my child to be allocated a place at:

Name of second preference school:		For office use only
Please name any brothers or sisters who will be attending this school:	Date of birth:	
.....	
.....	
Reasons for preferring this school (additional information may be attached on a separate A4 sheet):		

If my child does not qualify for a place at my first or second preference school, I would like my child to be allocated a place at:

Name of third preference school:		For office use only
Please name any brothers or sisters who will be attending this school:	Date of birth:	
.....	
.....	
Reasons for preferring this school (additional information may be attached on a separate A4 sheet):		

WHEN IS THE PLACE AT THE ABOVE SCHOOL(S) NEEDED FROM? /..... /.....

Applications will be processed no more than six school weeks in advance of a school place being required. If a parent/carer has not specified a desired start date, it will be expected that the place will be taken up within two school weeks of allocation.

Please return this form to: Admissions and Transport, Camel Building, County Hall, Treyew Road, Truro, TR1 3AY. If you wish to receive acknowledgement of receipt, please enclose a stamped addressed envelope.

The information you have submitted on this form will be used by the Admissions & Transport Team in Children’s Schools and Families to administer your application for a place at a school, we may share the information you have given us with other services or professionals working for or on behalf of the Council in respect to that application process. We will treat your information throughout this process confidentially and limit access to it to only those who need to view it. Cornwall Council adheres to all the principles of the Data Protection Act 1998. Your information will be stored electronically on password protected and access controlled computer systems and will be deleted after one year. Our Data Protection policy can be viewed at www.cornwall.gov.uk