

Transfer to Secondary School Waiting List Request



Please complete this form in **BLOCK CAPITALS** and black ink to ensure that your child's name is added to the waiting list.

ANY MISSING INFORMATION COULD DELAY THIS FORM BEING PROCESSED.

PLEASE RETURN TO: Strood Academy, Carnation Road, Strood, Kent ME2 2SX or scan to info@stroodacademy.org

STUDENT DETAILS

FORNAME(S):	SURNAME:
GENDER:	DATE OF BIRTH:
HOME ADDRESS:	
POSTCODE:	
CURRENT YEAR GROUP:	
CURRENT or IF NO LONGER ON ROLL LAST SCHOOL ATTENDED	
PLEASE GIVE REASONS FOR CHANGE OF SCHOOL	

PARENT/CARER DETAILS

TITLE: Mr / Mrs / Miss / Ms / other _____		
FORNAME(S):	SURNAME:	
RELATIONSHIP TO CHILD:		
HOME TELEPHONE NUMBER:	MOBILE:	WORK:

PARENT/CARER DETAILS

TITLE: Mr / Mrs / Miss / Ms / other _____		
FORNAME(S):	SURNAME:	
RELATIONSHIP TO CHILD:		
HOME TELEPHONE NUMBER:	MOBILE:	WORK:

DOES THIS STUDENT HAVE SIBLINGS CURRENTLY ON ROLL AT THE ACADEMY IF YES PLEASE GIVE DETAILS

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DOES THIS STUDENT HAVE A STATEMENT OF EDUCATIONAL NEEDS, IF YES PLEASE GIVE DETAILS

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IS THIS STUDENT IN THE CARE OF A LOCAL AUTHORITY AS LOOKED AFTER CHILD, IF YES PLEASE GIVE CONTACT DETAILS OF THE COUNCIL AND THE SOCIAL WORKER INVOLVED

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PLEASE ADD MY CHILD TO THE WAITING LIST FOR A PLACE AT STROOD ACADEMY

Signed:

Print Name:

Date:

If you have any questions please contact:

Email: info@stroodacademy.org

Tel: 01634 717121

Fax: 01634 735755