



All Saints' CE Primary School, Putney Common, London SW15 1HL

REGISTRATION OF INTEREST IN APPLYING FOR AN IN YEAR PLACE

Child's First Name:	Child's Surname:
Date of Birth:	Gender:
Address:	
Home Telephone Number:	
Current Nursery/School attended:	
Parent 1's Full Name:	Parent 1's Mobile Telephone Number:
Parent 1's Daytime Address:	Parent 1's Daytime Telephone Number:
Parent 2's Full Name:	Parent 2's Mobile Telephone Number:
Parent 2's Daytime Address:	Parent 2's Daytime Telephone Number:
Email address: Parent 1:	
Parent 2:	

I/We have read the School prospectus and am/are in sympathy with the Schools' Aims and Policy.
Having read the School prospectus please state under which category you are applying for admission

Category

If applying under category 4 and wish your application to be considered under the Free School Meals eligibility please provide the National Insurance number of the parent who is claiming benefits and include that parent's date of birth details below.

Name of Parent:	National Insurance Number:	Parent's Date of Birth:

If applying under category 5 and wish your application to be considered for a foundation place, please complete the church supplementary form. Additionally, you are invited to provide a statement in support of your application. Please attach this statement to your church supplementary form. Also, please attach a photograph of the child and child's parents/guardians to this form, this is merely to aid recognition, is entirely optional and has no bearing on admission status.

Should my/our application be successful, it is my/our intention that my/our child complete his/her primary education, to the age of eleven, at this school.

Signature of Parent/Guardian

Date.....

(Please complete form in full)