



BOUGHTON-UNDER-BLEAN AND DUNKIRK
PRIMARY SCHOOL

INTEREST IN ADMISSION FORM

Full name of child..... Male / Female

Date of Birth Birth certificate checked at school.....

Child's Permanent Address

.....

Post code..... Telephone Number.....

Details of those with legal parental responsibility:

Mother (name).....

Address (if different from above).....

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Post code..... Telephone Number.....

Father (name).....

Address (if different from above).....

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Post code..... Telephone Number.....

With whom does the child live?.....

Last school / nursery attended (if appropriate) and date of leaving.....

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Details of two persons willing to be contacted in case of emergency:

Name.....

Address.....

Tel.No.....Relationship to child.....

pto...

Name.....

Address.....

Tel.No..... Relationship to child.....

Health/ Medical Information:

Name & Address of Child's Doctor.....

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Details of any Clinics/Hospitals that the child attends.....

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Any allergies / illnesses / disabilities.....

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Date of last anti-tetanus injection.....

Any other information you would like to share with us

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General information:

My child's religion is.....

My child's ethnic origin is.....

My child's home language is.....

My child's first language is.....

Signature of person with Parental Responsibility:

Signed.....

Date.....