



St Cuthbert Mayne School

Joint Catholic and Church of England 11-18 Comprehensive School Dioceses of
Plymouth and Exeter

St Cuthbert Mayne Admission Application (in Year)

Please read these notes before completing the application form.

1. Please complete all sections on the application form. You will need to complete a separate application form for each child.
2. Completed forms should be returned to the address at the bottom of the application form.
3. If you are changing address you will need to send proof of residency e.g. a rental agreement or evidence of exchange of contracts. Applications will not be processed until this evidence is received.
5. If your child attended a school outside of the UK, please give as much detail as you can about their education. We do not accept applications from children who are not citizens of the European Union or European Economic area countries until they have entered the UK. Evidence of nationality may be required.
6. You will also need to complete a supplementary information form which you will find at the end of this form although your application will still be considered without this if you prefer.

Section 1 - Please complete details in full

Surname/Family name of child.....

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

Date of Birth /..... /..... Male/Female (please delete as necessary)

First Language.....

For students whose first language is other than English, please complete the following:

Country of Birth.....Nationality.....

Passport Number.....Date of entry to Country.....

Asylum Status.....Asylum Seeker/Refugee

Parent's/carer's full name (please print) (Mr/Mrs/Miss/Ms/Dr) (please delete as necessary)

(If you do not have parental responsibility, you cannot apply for a school place)

1

Do you have parental responsibility for the child Yes/No Relationship to child.....

Telephone number.....Email

2

Do you have parental responsibility for the child Yes/No Relationship to child.....

Telephone number.....Email.....

Is there a court order in relation to this child Yes/No

If yes please give details

Current address

Future address

Date of move to new address (if applicable)..... /..... /.....

Does your child have a current Statement of Special Educational Need? Yes/No

Is your child in the care of the Local Authority/adopted after being in care/subject to a Residence Order or Special Guardianship Order? Yes/No

If yes please give details

Section 2 - About your child's current school

Name.....

Address.....

Telephone number and fax number of current/last school.

.....

Name of Headteacher or Year Head at current/last school

Reason for changing schools

.....

For admissions into year 10 or 11, please tick subjects being studied

English	Maths	Science	Art	Music	French	ICT
PE/Sports Studies	Drama	Business Studies	Food Tech	Textiles	Media Studies	
Geography	Resistant Materials	RE	History	Spanish	Other	

Does a sibling attend this school? Yes/No

Section 6 – Agreement/Declaration

Parent's/Carer's SignatureDate..... /..... /.....

Information collected and processed by Torbay Council complies and is stored in accordance with the UK Data Protection Act, 1998. The information you provide on this form will be used to process your application for a school place. Torbay Council does not rent or sell your personal information to third parties. The only parties that the information may be disclosed to are other Council departments, schools and other LAs. We also may need to disclose information if required to do so by law. In accordance with the Fraud Act 2006 should the information given be found to be fraudulent then the offer of a school place can be withdrawn. If you want further information about Data Protection, including details of the purposes for which data is processed, please look under the relevant section on the Council's web pages, or contact the Information Governance Team on 01803 207467. By signing and returning this form you acknowledge that you have read, understand and agree to this data processing.

Return this form to: Helen Sivyer, Admissions, Admissions Office, St Cuthbert Mayne School, Trumlands Road, Torquay, Devon, TQ1 4RN Telephone: 01803 328725

SUPPLEMENTARY APPLICATION FORM

Please complete in **BLOCK CAPITALS**
SECTION 1- REGISTRATION

LEGAL SURNAME OF CHILD			
CHRISTIAN NAMES		SEX	
DATE OF BIRTH			

- I am applying for a place within Category 1 or 2 of the Admissions Criteria
Complete section 2. Then go to Section 4.
- I am applying for a place within Category 3 of the Admissions Criteria
Complete sections 2, 3 and 4.
- I am applying for a place outside of the above categories in the Admissions Criteria
Go to section 4.

SECTION 2 – BAPTISM & RELIGIOUS INFORMATION

Has your son/daughter been baptised?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Date, Church and Town of Baptism		
Is your son/daughter a regular worshipper? (please base your answer on the last 12 months)		
No <input type="checkbox"/> Yes: more than monthly <input type="checkbox"/> monthly <input type="checkbox"/> less than monthly <input type="checkbox"/>		
Name and address of the priest / minister of the church at which your child worships:		

Please attach a photocopy of the Certificate of Baptism to your application as originals cannot be returned. Please be aware that this application form will be sent to the minister named above together with the Religious Affiliation Form for completion.

SECTION 3

Although belonging to thedenomination we do not attend church for reason stated below...

SECTION 4 - SIGNATURE

Signed _____	Title (Mr/Mrs etc): _____
Print Name: _____	Date: _____