

## Supplementary Information Form

### Year 7 Admission - September 2024

**This Supplementary Information Form (SIF) should be completed in full and RETURNED TO THE SCHOOL BY POST OR EMAIL by 31st OCTOBER 2023 at the latest.**

**It is NOT an Application form. Applications for a place at this school MUST be made through your Local Authority by 31<sup>st</sup> October 2023.**

**You should only fill in this form if you have Parental Responsibility for the child you are applying for a school place for.**

**Please return to:**

**BY POST:** Admissions Manager, Chingford Foundation School, Nevin Drive, Chingford, London E4 7LT  
**OR EMAIL:** [Stuckey@chingfordfs.org.uk](mailto:Stuckey@chingfordfs.org.uk)

**You MUST include with the application, the following documents:**

- 1) A copy of a document to show **YOUR home address** (e.g. a government produced letter such as Council Tax Bill/Housing Benefit, NHS letter dated within the last 12 months, recent utility bill or bank statement dated within the last 3 months or Driving License) [N.B. a Mobile Phone Bill or Tenancy Agreement is not acceptable.]
- 2) A copy of a document to show your **CHILD's date of birth** (e.g. Birth Certificate or Passport)
- 3) A copy of a document to show the **CHILD's home address** (e.g. a government produced letter such as Child Benefit or Child Tax Credit dated within the last 12 months or bank statement/Trust fund dated within the last 3 months or Hospital appointment letter dated within the last 3 months)
- 4) Any other documents specified within this application

*Please note that all data will be processed in accordance with the requirements of the Data Protection Act 2018 and the EU's General Data Protection Regulation (GDPR). We are committed to safeguarding the privacy of users who apply to our school and we will only use the information we collect about you lawfully. Please see our Privacy Notice on our website*

Legal Surname of <b>Child</b>				
Legal First Name of <b>Child</b>		Middle Name(s)		
Gender	Male/Female	Date of Birth	/ /	
Full <u>permanent</u> address of <b>Child</b>	Postcode:			
When did the <b>Child</b> move into this address	Date:			
Current or previous School	Name:	Address:		
Surname of <b>Parent/Carer</b>				
Title (Mr/Mrs/Miss)				
First Name of <b>Parent/Carer</b>				
Address of <b>Parent/Carer</b>	Postcode:			
Email Address				
Home Phone Number				
Mobile Telephone Number				
Council Tax Number <i>(Please attach current Council Tax/annual statement)</i>		Do you have parental responsibility for the child? <i>(See Declaration section below)</i>	Yes/No	
Is your child in a private Fostering arrangement? <i>(This is an arrangement between the child's parent and a nominated person, who is not a close family member, and with whom the child has been living for more than 28 days)</i>			Yes/No	
Is the child in Public Care or Adopted from Care? <i>(If the child is in public care, this form MUST be completed by their Social Worker with the name of the local authority included. If the child is adopted from care, you must provide a copy of the Court Order)</i>			Yes/No	
Does the child currently have any siblings on roll at Chingford Foundation School? <i>(If yes, you must enter the names of the siblings)</i>	Yes/No	Name of Sibling(s)	Year	Relationship (e.g. sister/brother)
Does the child currently have a Parent/Carer who is currently employed by Chingford Foundation School? <i>(If yes, you must enter the names of employee)</i>	Yes/No	Name of Parent/Carer	Start Date	Relationship (e.g. mother, father)

**DECLARATION:**

I have attached the supporting documents as required by this form. I confirm that I have parental responsibility for the child named in this document, and that the information given is correct.

I understand that forms are only accepted from a person who is legally responsible for the child and that if the child lives with relatives and not their parents, documents providing legal guardianship must be submitted with this form.

I understand that if I give any false or misleading information or supporting documentation, this supplementary information form will no longer be valid and the school may withdraw the offer of a school place.

I understand that the information I give on this form may be shared with relevant Local Authorities. I also understand that the School may take reasonable steps to confirm the accuracy of the information and documentation supplied by contacting the bodies/parties mentioned therein.

Name:

Signed:

Date:

SIF September 2024