



## In-Year Admission Application Form – KS4

### INFORMATION TO BE COMPLETED BY THE PARENT/CARER:

#### CHILD’S DETAILS:

[1] FIRST NAME: ..... MIDDLE NAME: ..... SURNAME: .....  
(PLEASE ENSURE YOU PROVIDE YOUR CHILD’S FULL LEGAL NAME)

[2] DATE OF BIRTH: ..... [3] YEAR GROUP:.....

[4] GENDER: MALE / FEMALE (delete as applicable) [5] CHILD’S FIRST LANGUAGE:.....

[6] ADDRESS: .....

POSTCODE:.....

#### PARENT/CARER DETAILS:

[7] FULL NAMES OF PARENTS/CARERS WITH WHOM THE CHILD LIVES AT THE ABOVE ADDRESS:

(a) TITLE: ..... FIRST NAME: ..... SURNAME: .....

RELATIONSHIP TO STUDENT:.....

CONTACT NUMBER(S): MOBILE: ..... HOME: .....

EMAIL ADDRESS: .....

(b) TITLE: ..... FIRST NAME: ..... SURNAME: .....

RELATIONSHIP TO STUDENT:.....

CONTACT NUMBER(S): MOBILE: .....

EMAIL ADDRESS: .....

#### ADDITIONAL INFORMATION:

[8] DOES THE CHILD PERMANENTLY RESIDE IN THE UK? YES / NO (delete as applicable)

[9] IS THE CHILD IN PUBLIC CARE (“LOOKED AFTER”)? YES / NO (delete as applicable)

[10] IS THE CHILD ON AN EDUCATION HEALTH CARE PLAN? YES / NO (delete as applicable)

**Telephone:** 01773 716396

**Fax:** 01773 765814

**Website:** [www.heanorgate.org.uk](http://www.heanorgate.org.uk)

**Email:** [mail@heanorgate.derbyshire.sch.uk](mailto:mail@heanorgate.derbyshire.sch.uk)



# HEANOR GATE SCIENCE COLLEGE

“Develop all learners to achieve their full potential”  
“Create a culture of aspiration”

Principal: **Mr S Huntington**



## In-Year Admission Application Form – KS4

[11] NAME & ADDRESS OF CURRENT SCHOOL .....

[12] REASON FOR TRANSFER.....  
(Please continue on separate sheet if required)

[13] BROTHER / SISTER AT HEANOR GATE SCIENCE COLLEGE? YES / NO (delete as applicable)

IF “YES”, NAME(S) AND DATE(S) OF BIRTH .....

### EDUCATION INFORMATION:

[14] CURRENT GCSE OPTIONS:

SUBJECT..... CURRENT GRADE..... EXAM BOARD.....

SUBJECT..... CURRENT GRADE..... EXAM BOARD.....

SUBJECT..... CURRENT GRADE..... EXAM BOARD.....

SUBJECT..... CURRENT GRADE..... EXAM BOARD.....

I/We have read and accept the arrangements described in the school’s policy and that the information submitted on this form is correct. Providing fraudulent or misleading information could result in the place being withdrawn.

Signed ..... (Parent/Carer) Date: .....

*Please return to The Admissions Officer at Heanor Gate Science College*

The data supplied on this form will be kept on computer. The school is registered for this purpose under the *Data Protection Act*.

**Telephone:** 01773 716396  
**Fax:** 01773 765814  
**Website:** [www.heanorgate.org.uk](http://www.heanorgate.org.uk)  
**Email:** [mail@heanorgate.derbyshire.sch.uk](mailto:mail@heanorgate.derbyshire.sch.uk)