

**CONFIDENTIAL - RUMBOLDSWHYKE PRIMARY SCHOOL**

**FOUNDATION PLACE - SUPPLEMENTARY INFORMATION FORM**

**(PLEASE NOTE THAT IF YOUR CHILD HAS AN EDUCATION, HEALTH AND CARE PLAN (EHCP) YOU SHOULD DISCUSS THE MATTER OF HIS/HER CHOICE OF SCHOOL DIRECTLY WITH THE LOCAL AUTHORITY IN THE FIRST INSTANCE.)**

**Application for Reception place September 2026 or**

***(delete as appropriate)***

**Application for In Year admission into Year R / 1 / 2 / 3 / 4 / 5 / 6 (please circle) during academic year 2025-2026**

**TO BE COMPLETED IN BLACK INK**

Pupil's legal surname:	Legal forename:
Middle name(s):	Chosen name (if different to legal name):
Date of birth:	Male / Female (delete as applicable)
Address House name/number:	Street:
Area/village:	Postal Town:
County:	Postcode:
Home Telephone:	Local Authority for this address:

Please give names of parent(s)/guardian(s) **who live at the same address as the pupil**

Surname:	Title:
Forename:	Relationship to pupil:
Does this person have Parental Responsibility? YES / NO	
Daytime telephone:	Mobile telephone:
Email address:	
Surname:	Title:
Forename:	Relationship to pupil:
Does this person have Parental Responsibility? YES / NO	
Daytime telephone:	Mobile telephone:
Email address:	
Pupil's Present School:	
Does he/she have any brothers or sisters who will be attending Rumboldswyke Primary School at the time of admission? YES / NO	

If so, which Year Group will the sibling be in (at time of admission):	
Of which Christian denomination, if any, are you a member?	
What Church or Chapel do you attend or are you associated with?	
Are you on your Church's Electoral Roll or its equivalent? YES/NO	
<b>Please give the name and address of your parish priest or minister and ask him/her to contact our office directly at admissions@rumboldswyke.org.uk, for the required Church Support Form that must be completed and returned, under separate cover, to arrive no later than 31<sup>st</sup> January 2026</b>	
Title and Initials:	Surname:
House Name/Number:	Street:
Area/village:	Postal Town:
County and Postcode:	Email address:
<b>If you have joined the above Church, from another Church, within the last two years, please give the name and address of your previous parish priest or minister and ask him/her to contact our office directly at admissions@rumboldswyke.org.uk, for the required Church Support Form that must be completed and returned, under separate cover, to arrive no later than 31<sup>st</sup> January 2026</b>	
Title and Initials:	Surname:
House Name/Number:	Street:
Area/village:	Postal Town:
County and Postcode:	Email address:
<b>Please attach if necessary, any information which may be relevant to this application. Applicants for admission under Criteria 1(b) places should attach appropriate documentation from a qualified person (usually a doctor or social worker) stating clearly the exceptional reasons why the child should attend Rumboldswyke Primary School.</b>	
DOES YOUR CHILD HAVE A CURRENT EHCP? (section 4.1(b) of the Admissions Arrangements 2025)	YES / NO
IS YOUR CHILD 'LOOKED AFTER' OR 'WAS PREVIOUSLY LOOKED AFTER'? (section 4.1(a) of the Admissions Arrangements 2026)	YES / NO
Are you a member of staff at Rumboldswyke School who has been employed on a permanent contract for at least two years? (section 4.3 of the Admissions Arrangements 2026)	YES / NO
Signed:	Date:

<b>REMINDER – HAVE YOU ARRANGED FOR A CHURCH SUPPORT FORM TO BE COMPLETED?</b>
<b>THIS FORM SHOULD BE RETURNED TO THE SCHOOL BY 18<sup>th</sup> January 2026 (RECEPTION APPLICATIONS ONLY)</b>
TO: RUMBOLDSWHYKE ADMISSIONS, Rumboldswyke CofE Primary School, Rumbolds Close, Chichester, PO19 7UA

FOR OFFICE USE ONLY				DATE STAMP			
EHCP							
CLA/PCLA/SGO							
Staff							
Sibling							
Category	1	2	3	4	5	6	AGREED