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**REGISTRATION FORM**

Please complete this form in as much detail as possible. We require this information to be able to process your application for a place for your child. Please attach a passport size photograph with your form.

Information which is mandatory for you to provide is indicated below by an asterisk (\*).

If you do not complete the mandatory sections in full this may jeopardise or delay your application.

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| --- | --- | --- | --- | --- | --- |
| **Your child** | | | | | |
| **Surname of your child \*** | |  | | | |
| **First name(s) \***    (underline preferred name) | |  | | | |
| **Date of birth \*** | |  | | | |
| **Nationality** | |  | | | |
| **Place required** | | | | | |
| **Application** f**or entry in** **(please circle) \*** | | Year 7 Year 9 Sixth Form | | | |
| **Proposed term and year of entry \*** | |  | | | |
| **Please indicate whether you intend to apply for a scholarship for your child (academic, drama, art, music and sport scholarships available)** | | Y / N | | | |
| **Please indicate whether you intend to apply for a bursary for your child** | | Y / N | | | |
| **Other schools to which applications are being made** | |  | | | |
| **Your child’s current school** | | | | | |
| **Name and address of school\*** |  | | | | |
| **Dates of attendance\*** |  | | | | |
| **Name of Head\*** |  | | | | |
| **Please disclose details of any learning difficulty / special educational need /disability / behavioural, emotional and / or social difficulty. Please provide as much detail as possible in the space below. Where possible, please provide any relevant documentation.** | | | | | |
|  | | | | | |
| **Please disclose of any medical condition, health problem or allergy affecting your child that we should be aware of during the entrance process. Please provide us with as much detail as possible in the space below. Where possible, please provide any relevant documentation such as medical reports etc.** | | | | | |
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| **Please outline any of your child's artistic, dramatic, musical or sporting skills or experience**  (if applicable) | | | | | |
|  | | | | | |
| **Please give an outline of your child's other hobbies or interests**  (if applicable) | | | | | |
|  | | | | | |
| **Connections with the School**  Please mention here the names of any other members of the family attending the School or registered for entry; or any other connection with the School. | | | | | |
|  |  | | | | |
| **First signatory** |  | | | | |
| **Title\***  (e.g. Mr, Mrs, Ms) |  | | | | |
| **Full name\*** |  | | | | |
| **Relationship to child\*** |  | | | | |
| **Contact telephone number\*** |  | **Evening  (if different)** |  | **Mobile  (if different)** |  |
| **Email address\*** |  | | | | |
| **Address\***  (including postcode) |  | | | | |
| **Occupation** |  | | | | |
| **Employer's business name and address** |  | | | | |
| **Second signatory** | | | | | |
| **Title\***  (e.g. Mr, Mrs, Ms) |  | | | | |
| **Full name\*** |  | | | | |
| **Relationship to child\*** |  | | | | |
| **Contact telephone number\*** |  | **Evening  (if different)** |  | **Mobile  (if different)** |  |
| **Email address\*** |  | | | | |
| **Address\***  (including postcode) |  | | | | |
| **Occupation** |  | | | | |
| **Employer's business name and address** |  | | | | |

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| **Other people with parental responsibility\***  Please provide the name(s) and current address(es) of any other person with parental responsibility (i.e. legal responsibility) for the above named child. This may be a legal guardian or step parent and their consent to the child attending the School will be required if an offer of a place is made. | | | | | | | |
| **Title** | |  | | | | | |
| **Full name** | |  | | | | | |
| **Address**  (including postcode) | |  | | | | | |
| **If someone other than the first and second signatories is to pay the School fees for your child please provide below their full name and address and their relationship to your child** | | | | | | | |
|  | | | | | | | |
| **Please indicate how you first heard of Halliford School** | | | | | | | |
| Recommendation from current school |  | Recommendation from current parent |  | Internet search |  | Advert in publication |  |
| Word of Mouth |  | Direct mail |  | Social Media |  | Other (please specify) |  |

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| **If your child is a national resident of a country outside the EEA, or if you have provided a home address for correspondence outside the EEA, please note that the School is required to take steps to ascertain that your child has permission to be in the UK.**  **Please confirm whether your child will require sponsorship from the School in order to obtain a visa to study in the United Kingdom at this School (please circle).\*** | |
| Yes | No |
| **If another valid immigration category applies to your child please provide full details below. Please refer to the Immigration Information on the following page.\*** | |
|  | |
| **Immigration Information** | |
| If your child has, or will have, a time restricted or temporary visa in any other immigration category (for example, as a dependent) please provide a copy of this when returning this form if you have it.  Please note that we reserve the right to:  Request further information and sight of documentation in support of your declarations regarding immigration; and  To share information with UK Visas and Immigration (**UKVI**) and the Home Office for the purposes of compliance with our responsibilities as a licenced sponsor.  The School may be required to notify and / or supply information relating to your (i.e. the parents) and / or your child's right to enter, reside and / or study in the United Kingdom to UKVI and the Home Office (and to do so whether we sponsor your child or not). | |

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| **Further Notes** |
| Early registration is recommended. Registrations will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the School at the time offers are made. A copy of the School's *Terms and Conditions* will be supplied on request. |
| **Data Privacy** |
| This information will be used by the School during the admissions process in order to manage and assess your application and your child's suitability for a place at the School.  For example:   1. We may contact your child's current or previous school to ask for a reference; 2. We may ask for information about other schools to which you are applying because they may hold their entrance exam on the same day as ours; 3. We may contact other people with parental responsibility to check that they consent to your child joining the School; 4. The information about medical conditions, health problems or allergies will be used to ensure that we have made any reasonable adjustments / suitable arrangements for your child when they visit the School or during any entrance assessments and subsequently if they are offered a place. This information is required due to the contractual and statutory duties the school has towards your child. Prior to the commencement of the admissions process, we will contact you about any special arrangements your child may require. 5. We may also need to share information with UKVI as explained above.   If your child is not offered a place, or if you do not accept the offer of a place, we will only retain this information for as long as we need to. Unless there are exceptional circumstances, information is kept for a year after the end of the admissions process.  For more information about how the School will use your information, and your child's information, please see our pupil privacy notice and our parent privacy notice. Both of these documents are published on the School's website. If your child is aged 12 years or older please show him / her the privacy notice and discuss it with him / her. |

**DECLARATION**

I / We request that our child named above is registered as a prospective pupil.

I / We have paid by bank transfer to **A/c number 53582284, Sort Code 54-41-51, Ref – Child’s full name** the non-refundable Registration Fee of £125 (£150 for overseas applicants) before returning this completed Registration Form duly signed by me / us.

(\* - Please delete as applicable)

**Signatures**

|  |  |  |
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|  | **First signatory** | **Second signatory** |
| **Signature \*** |  |  |
| **Name in full \***  (please include all names) |  |  |
| **Date of birth**  (optional) |  |  |
| **Relationship to child \*** |  |  |
| **Date** |  |  |

Please return this form to: The Registrar, Halliford School, Russell Road, Shepperton, Middlesex, TW17 9HX

registrar@hallifordschool.co.uk