



# KING HENRY VIII SCHOOL

## PRE-PREP

### Application Form



***To be completed by those with parental responsibility for the child*** (Parental responsibility is defined in the Children Act 1989 as "all rights, duties, powers and responsibilities and authority which by law a parent of a child has in relation to the child and his or her property"; It equates to legal responsibility for the child. If you have any doubts about whether you do or do not have parental responsibility for the child you may wish to seek legal advice)

#### **PLEASE USE BLOCK CAPITALS THROUGHOUT THIS FORM**

#### **I WISH TO ENTER MY CHILD FOR**

Term of entry:	Autumn <input type="checkbox"/>	Spring <input type="checkbox"/>	Summer <input type="checkbox"/>	
Year of entry:	2024 <input type="checkbox"/>	2025 <input type="checkbox"/>	2026 <input type="checkbox"/>	2027 <input type="checkbox"/>

Year group:	Nursery <input type="checkbox"/>	Reception <input type="checkbox"/>	Year 1 <input type="checkbox"/>	Year 2 <input type="checkbox"/>
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#### **CHILD'S DETAILS**

Child's legal forename	Middle name(s)
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Child's legal surname
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Child's date of birth	D   D   M   M   Y   Y   Y   Y	Female <input type="checkbox"/>	Male <input type="checkbox"/>
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Child's nationality
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Is English your child's first language?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	(If no, please state their first language)
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I/we enclose a copy of the child's full birth certificate	<input type="checkbox"/>	(please tick)
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I/we enclose a copy of the child's passport	<input type="checkbox"/>	(please tick)
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#### **CHILD'S CURRENT SCHOOL**

Name of school
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Are you happy for us to contact your child's current nursery/school at this time?	<input type="checkbox"/>	(please tick)
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If you have any other children that attend a Coventry School Foundation School, please list their name, school and year group.

MEDICAL AND OTHER CONDITIONS

Are there any circumstances or conditions of which the School should be aware? Please tick as appropriate:

ADHD		Dyscalculia		Hearing impairment	
Asperger’s Syndrome		Dyslexia		Limited mobility	
Asthma		Dyspraxia		Mild allergies ( <i>specify below</i> )	
Autism		Epilepsy		Sensory Processing Disorder	
Diabetes		Epipen carried		Severe allergies (specify below)	
Disability ( <i>specify below</i> )		Hayfever		Visual impairment	

Please list other conditions (including dietary) and specific details from the list above here:

Please enclose the most recent educational psychologist’s report, if you have one, and relevant medical, special needs or other reports you have.

PARENT DETAILS

PARENT 1 (with whom the child lives)

TitleForename

Surname

Relationship to child

Address

Postcode

Email

Mobile phone

Home phone

Occupation

Nationality

If you have parental responsibility for the child in a capacity other than as a parent of the child, please state your relationship to the child here:

PARENT 2

TitleForename

Surname

Relationship to child

Address

Postcode

Email

Mobile phone

Home phone

Occupation

Nationality

If you have parental responsibility for the child in a capacity other than as a parent of the child, please state your relationship to the child here:

PLEASE CONFIRM PAYMENT OF THE £50 NON-REFUNDABLE APPLICATION FEE (NO CASH)

BANK TRANSFER ACCOUNT DETAILS

Bank Account Name: COVENTRY SCHOOL FOUNDATION – FEES

Bank Account Number: 01068607

Sort Code: 30-92-33

Swift Code: LOYDGB2L

IBAN: GB68LOYD30923301068607

PLEASE USE THE FOLLOWING REFERENCE FORMAT  
KPP then FIRST FOUR LETTERS of child's surname, then the FIRST FOUR LETTERS of the child's forename

I/we have completed a bank transfer (details below)

☐ (please tick)

DECLARATION

We/I (as the holders of parental responsibility) request that the name of the above-named child be registered as a prospective pupil of King Henry VIII School Pre-Prep.

By signing this application form we understand, accept and agree that:

- Registration of my/our child as a prospective pupil does not secure our child a place at the School but does ensure that my/our child will be considered for selection as a pupil at the School;
- If my/our child is offered a place at the School, such an offer will be subject to the School's terms and conditions for the provision of educational services, which will bind me/us (as the holders of parental responsibility for him/her) in the event (and from the moment) that I/we accept the place; **A copy of the current terms and conditions is available for your information upon request at any time, but please note that the version of the parent contract supplied may be subject to change prior to the point in time when a place at the School for your child may be offered;**
- The School will request information and a reference in respect of our child and information about any outstanding fees and/or supplemental charges; from the child's present school or educational institution.
- The School may process any personal data about us (or either of us) and our child, including sensitive personal data about our child (such as medical details), for the purposes of:
  - Administering its list of prospective pupils;
  - Its registration, selection and/or admission procedures, including as set out above; and
  - Communicating with the parents of prospective pupils about the School and generally managing relationships between the School and its prospective pupils.
  - The School will process personal data about you and your child in accordance with the Data Protection Act 1998, the General Data Protection Regulation 2018 (GDPR) and the School's Privacy Policy. Personal data held by us is processed by appropriate members of staff for the purposes for which the data was provided. We take technical and organisational steps to ensure the security of personal data. In the course of School business, we share personal data (including special category personal data where appropriate) with third parties such as examination boards and relevant authorities (e.g. the Department for Education).

Signature

Date

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M

Y

Y

Y

Y

Print name

Signature

Date

D

D

M

M

Y

Y

Y

Y

Print name

