



The Compass School

APPLICATION FOR ADMISSION

We would be pleased if you complete this form and return it signed, to The Compass School at 11 West Road, Haddington EH41 3RD together with payment of £40 (per family) for the application fee referred to overleaf. Payment can be made by cheque or BACS to sort code: 80-11-00 account number: 00212859.

Information on admission to the School is published on the School's website and is subject to revision and amendment from time to time. A copy of the School's Admissions Policy can be obtained on request from the School Office.

Please complete the following boxes 1 to 9 inclusive with the requested details on the child for whom this application is made.

Preferred Admission Date:

Please enter a specific date or a term and year (e.g. Autumn Term 2016).

Surname:

First and Middle Name(s):

Please underline name normally used or add within parenthesis any other name by which the child is generally known.

Date of Birth:

Gender:

Current School/Nursery (if applicable):

(1) Name:

(2) Address:

(3) Phone Number:

(4) Email:

Name of Headmaster/Headmistress/Nursery Manager:

Brothers and Sisters:

Name

Date of Birth

School currently attended

(1)

(1)

(1)

(2)

(2)

(2)

(3)

(3)

(3)

Does your child or family have any existing or previous connection with the School – YES / NO (delete as appropriate). If 'YES', please give details below:

If the School offers a place for the child, then the offer shall be deemed to have been declined and refused if it is not accepted by me/us within the time stipulated in the letter of offer.

It is important, in the interest of the child [or young person], for parents to advise the School of any disability that the child has and of any medical condition or other circumstances which might require the child to be given special assistance at the School or of which you think the School should be aware.

<p>Learning Needs: Does your child have any specific learning needs. If 'yes' please give specific details on a separate sheet to accompany this form.</p>	<p>YES / NO</p>
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<p>Accessibility: Please let us know if you or your child has any accessibility needs. If 'yes' please give specific details on a separate sheet to accompany this form so that we may be able to provide you/your child with assistance in accessing the school building or so that we may be as efficient as possible in our communication with you.</p>	<p>YES / NO</p>
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I/We, being the parent/parents of or being the person/persons having parental rights in respect of the child:-

- 1) Hereby apply for a place at The Compass School ("the School") for the child to become a pupil at the School with effect from the Admission Date specified above;
- 2) Enclose a non refundable application fee of £40 in respect of the receipt and consideration of this application by the School;
- 3) Accept that this application is subject to the School's admissions policy current as at the date of the receipt of this application by the School, as such policy is from time to time revised or amended;
- 4) Recognise that there is no obligation on the School to offer a place at the School for the child or to accept the child as a pupil of the School; and
- 5) Authorise the child's current school named above to (a) confirm to the School whether all fees in respect of the child have been paid to that current school and (b) disclose to the School information on the child (e.g. academic report and child profile), and authorise the School to disclose this application and authorisation to that current school.

My/our details are as follows:-

Full name		Full name	
Relationship to Child		Relationship to Child	
Address		Address	
Postcode		Postcode	
Phone Number (day)		Phone Number (day)	
Mobile Phone Number		Mobile Phone Number	
Email address		Email address	
Signature		Signature	
Date		Date	

<p>Financial Assistance: Details of financial support that may be available from the School can be found on our website. Please indicate if you would like to apply for such support.</p>	<p>YES / NO</p>
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