



Application for Boarding Years 7-11 September 2020

Please complete and return to:

Admissions Officer

Sexey's School

Cole Road

BRUTON

Somerset

BA10 0DF

Tel: 01749 813393

e-mail: admissions@sexey.somerset.sch.uk

website: www.sexey.somerset.sch.uk

For Office Use Only

Rec'd ___/___/___

Ack'd ___/___/___

Forename _____

DOB ___/___/___

Year Group _____

Male

Female

UK

Overseas

Present School _____

Reference Requested

___/___/___

Reference Received

___/___/___

Viewing Date

___/___/___

Interview Date

___/___/___

Suitable for Boarding

Offered

Not Offered

Accepted

Withdrawn

PLEASE READ THESE NOTES BEFORE COMPLETING THIS FORM

Please ensure you have read the school prospectus before completing this form. This is available on the school's website – www.sexeyes.somerset.sch.uk

Admission is limited to students who are nationals of the UK and are eligible to hold a full British passport, or those who are nationals of the European Union countries, or those who have the right of residency in the UK.

Please include a copy of your son/daughter's passport with your application along with a recent passport style photograph.

This form should be used by parents/carers requesting a boarding place at Sexey's School Years 7-11. Please complete a separate application for each child.

All relevant sections of the form **must** be completed as fully as possible or the form will be returned to you.

All information will remain completely confidential.

This form can be made available in large type upon request.

CONFIDENTIAL - APPLICATION FOR BOARDING

| | | | | | | |
|----------------------------|----|----|----|-------------|---------------|--|
| Pupil's Surname: | | | | | | |
| Forenames: | | | | | | |
| Preferred Forename: | | | | | | |
| Date of Birth: | DD | MM | YY | Male | Female | |
| Nationality of Applicant | | | | | | |

| | | | | | | | |
|---|--|----------------|--|--|------------------|--|--|
| Student Home Address (This Must be the Student's main residence and all correspondence will be sent to this address) | <hr style="border: 1px solid black;"/> <hr style="border: 1px solid black;"/> <hr style="border: 1px solid black;"/> | | | | | | |
| Full Names & Titles of Parent(s) | Father | Mr/Dr | | | | | |
| | Mother | Miss/Mrs/Ms/Dr | | | | | |
| Name and Address of Parent/Carer if different from Student | <hr style="border: 1px solid black;"/> <hr style="border: 1px solid black;"/> | | | | | | |
| Daytime Contact Numbers | Father/ Carer | | | | Mother/ Carer | | |
| E-Mail Address | | | | | | | |

Present School

| | | | | | | |
|---|----------------------|--|--|--|--|--|
| Type of School: (please tick) | Name of Headteacher: | | | | | |
| State: Primary/Junior Middle Secondary Independent: Prep Senior Other: | School Name: | | | | | |
| | Address: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Tel No: | | | | | |
| School email: | | | | | | |

Previous Schools attended

| | | | |
|-------|--|----------------|--|
| Name: | | Date attended: | |
| Name: | | Date attended: | |

General Information (please continue on a separate sheet if necessary)

| | | |
|---|--|----------------|
| Why do you wish your child to attend boarding school? Please provide information that will assist in determining the child's boarding need. | | |
| Why have you selected Sexey's School? | | |
| Is your child a Young Carer? | Yes/No | |
| Has your son/daughter ever been excluded from a previous school? | Yes/No If Yes please provide further information | |
| How did you first learn of the boarding facilities at Sexey's School? | | |
| Previous experience of boarding/living away from home. | | |
| Please provide any details which you feel would be helpful in informing us about your child, particularly information that will assist us in assessing their suitability to board or boarding need. | Details: | |
| Are there any areas where you feel Sexey's could particularly help or support your child (previously parents have included information relating to special educational support, medical needs, personal development). | Details: | |
| Have any safeguarding concerns ever been raised about your son/daughter at any stage? <i>Any information provided will not be used to assess suitability to board.</i> | | |
| Any other details you wish to include. | Details: | |
| Who will be responsible for paying fees? (please indicate if claiming fees from an employer or other organisation). | | |
| Brothers/sisters currently or previously at Sexey's School | Name: | Year group: |
| Name and date of birth of any younger brothers/sisters. | Name: | Date of Birth: |

Signed: Date:

Print Name:

Have you completed all sections?