



## PUPIL APPLICATION FORM

September 2021

All sections must be complete. Please write N/A if not applicable

If completing by hand, please write in BLOCK CAPITALS and use blue/black ink

PUPIL DETAILS				
Surname:				
Forename:		Middle Names:		
Date of Birth:				
Home Address:				
Postcode:		Home Telephone:		
Is the child a 'Looked After Child'? i.e. In the care of the Local Authority (LA). <i>Please tick appropriate</i>	Yes		No	
Was the child previously looked after? i.e. previously been in the care of the LA. <i>Please tick appropriate</i>	Yes		No	
Does the child have an Education Health Care Plan?	Yes		No	

PRIMARY SCHOOL EDUCATION		
Does the child currently go to one of the following PACT primary schools? <i>Please tick appropriate</i>	Prince Albert School	
	Heathfield School	
	Birchfield School	

DETAILS OF SIBLINGS AT PRINCE ALBERT HIGH SCHOOL			
Full Name of siblings <i>already in school</i> (continue on another sheet if necessary):		Date of Birth:	Class/Form:
1.			
2.			
3.			
4.			
5.			

PARENT/GUARDIAN DETAILS			
1. Surname:		Forename/s:	
Relationship to Pupil:			
Contact Details:	Home:		Mobile:
	Work:		Email:

Home Address: <i>(if different to pupil)</i>			
			Postcode:
2. Surname:	Forename/s:		
Relationship to Pupil:			
Contact Details:	Home:	Mobile:	
	Work:	Email:	
Home Address: <i>(if different to pupil)</i>			
			Postcode:

PARENT/GUARDIAN EMPLOYMENT			
Do the child's parent/carer work for the armed forces?	Yes		No
Do the child's parent/carer currently work for PACT? <i>Please tick appropriate.</i>	Yes		No
If yes, please complete details below:			
Name:	Job title:	Length of time employed:	
1.			
2.			

PARENT/GUARDIAN DECLARATION	
I declare that I have provided the correct information and understand that the provision of false information may affect the offer of a school place for my child.	
I have read and understood the schools Admissions Policy and understand that places will be allocated accordingly.	
Parent/Guardian Signature:	Date:

RETURNING THE FORM	
Before returning your child's application, please check that you have completed the following:	
Fully completed the form: <i>If yes tick</i>	Signed the form: <i>If yes tick</i>
Return forms to:	<p align="center"><b>The Admissions Officer</b>          Prince Albert Community Trust          Unity House          27 Trinity Road          Aston          Birmingham          B6 6AJ</p>
T. 0121 725 5252	E. <a href="mailto:pahighadmissions@the-pact.co.uk">pahighadmissions@the-pact.co.uk</a> W. <a href="http://www.pahigh.co.uk">http://www.pahigh.co.uk</a>

FOR OFFICE USE ONLY:  
 Date application received:  
 Office signature:

UNITED WE ARE WORLD CLASS>