

ADMISSION TO SECONDARY SCHOOL – SEPTEMBER 2017

ACCEPTANCE / REFUSAL OF A SCHOOL PLACE

IMPORTANT:

Please ensure you have read the 'Next Steps for parents/carers' information leaflet before completing and submitting this form.

Please complete this form in BLOCK CAPITALS

School Offered			
Child's Name			(Boy/Girl) please delete
Child's Date of Birth		PID Number as shown on your offer letter	
Home Address	Post Code:		
Parent/Carer Name(s)	Title: Mr / Mrs / Miss / Ms / other _____ please delete		
Telephone Number			
Email address			

Please tick the appropriate box

	ACCEPTANCE - I would like to formally accept the place offered at your school for my child
	REFUSAL * - I would like to formally refuse the place offered at your school for my child

*I understand that by refusing the place offered at the school named above:

- + This place will be removed from my child and will be available to be offered to another child.
- + My child will not have a claim on a place I have previously refused at a future date and will be placed on the waiting list if I change my mind.

Signed	
Name (please print)	
Date	

COMPLETED FORMS MUST BE RETURNED TO THE SCHOOL OFFERED WITHIN 20 SCHOOL DAYS OF THE DATE OF THE OFFER LETTER