

# IN-YEAR ADMISSION TO A MEDWAY SCHOOL

## ACCEPTANCE / REFUSAL OF A SCHOOL PLACE

IMPORTANT:

Please read the information at [www.medway.gov.uk/inyearadmissions](http://www.medway.gov.uk/inyearadmissions) before submitting this form.

Your completed acceptance/refusal form and proof of address (e.g. council tax bill) must be returned to the school you were offered within 20 days of the date of your offer.

If you have any queries, please contact [casualadmissions@medway.gov.uk](mailto:casualadmissions@medway.gov.uk)

|  |  |
| --- | --- |
| School Offered |  |
| Child’s Name |  |
| Gender |  |
| Date of Birth |  |
| Home Address |  |
| Parent/Carer  Name |  |
| Telephone No. |  |
| Email address |  |
| Current School |  |

Please tick the appropriate box:

|  |  |
| --- | --- |
|  | ACCEPTANCE - I formally accept the place offered at your school for my child |
|  | REFUSAL \* - I formally refuse the place offered at your school for my child |

\*I have read and understand the consequences of refusing my offer as explained at [www.medway.gov.uk/inyearadmissions](http://www.medway.gov.uk/inyearadmissions)

|  |  |
| --- | --- |
| Signed |  |
| Name |  |
| Date |  |