Farlingaye High School

Application for a school place for children of a member of staff

Please complete the boxes below in printed capitals, following the instructions carefully.

Box 1 Personal Details *Complete all the details here and then move on to Box 2.*	
Full name of staff member:	
Address: Postcode:	Telephone Number:
Date appointment at Farlingaye commenced:	
Proposed date of entry for child(ren) to Farlingaye:	First date: And/or:
Date appointed to fill a vacant post for which there was a skills shortage:	

Box 2 Child's Details *Complete all the details here and then move on to Box 3.*	
Legal surname:	Legal forenames:
Address: Postcode:	
Date of Birth:	Boy/Girl (please circle)

Box 3 Agreement
I confirm that I have included Farlingaye High School in the list of schools for which I have applied on my local authority's application form. ***Signature:***_____*(Parent/Carer)* ***Date:***_____
Office use only: ☐ Agreed that the member of staff has been employed for two or more years at the time the application for admission to Farlingaye is made; Or ☐ Agreed that the appointment was made to fill a vacant post for which there was a skills shortage. *Signed:*_____ *Name:*_____ *Date:*_____