This completed form must be returned by 31 October 2025 to <u>ed-admissions@sheffield.gov.uk</u> Or Admissions Team, Early Years, Education & Skills Floor 5, Howden House, Union Street, Sheffield S1 2SH

	Sheffield City Council
Pupil ID	Sheffield Application Form
	entry to Secondary Schools September 2026
Pupil Details Last name	
First name(s)	
Date of birth	
Gender	Male/Female
Address	
City	
Postcode	
Current School	
Does your child have an	Yes/No
education health and care	If yes you must apply directly to the SEN Team
plan or statement of special educational needs	If <b>yes</b> , you must apply directly to the SEN Team.
Children in Care or Previous	Yes/No
Children in Care.	Note: Previous Children in Care are children who were in care but ceased to
	be so <u>because</u> they were adopted or became the subject of a Child Arrangement/Residence Order or Special Guardianship Order immediately
	following being in care. If you are unsure if your child is a Child in Care or
	Previously in care, please contact the Admissions Team.
Parent Details Title	
First & Last name(s)	
Relation to the child	
Address	
(If different to one above)	
City & Postcode	
Telephone/Mobile Number	
Is there anyone who shares	Yes/No
parental responsibility for this child?	If <b>yes</b> , please provide - Name:
	Relationship to child:
	Contact number:
	Please confirm that you have discussed the preferences and have their
	agreement by signing overleaf. We cannot process any application where there is a disagreement between parents.
Email	

## (Not to be used to apply for Private, Independent or Special Schools but you may indicate vour intention on this form) FOR OFFICE USE

Please attach additional paper if you need to write more information.

1 <sup>st</sup> Preferred School		СМ	SIB	CF	0
Reason for 1 <sup>st</sup>					
Name of sibling at 1 <sup>st</sup> School	Date of Birth	Year	Group		
2nd Preferred School		СМ	SIB	CF	0
Reason for 2nd ranked preference.					
Name of sibling at 2nd School	Date of Birth	Year	Group		
3rd Preferred School		СМ	SIB	CF	0
Reason for 3rd ranked preference.					
Name of sibling at 3 <sup>rd</sup> school	Date of Birth	Year	Group		

## **Declaration**

In the event of your child not receiving an offer of a place at a preferred school, the Authority cannot be held responsible where a place was not offered because of an error made by you because you failed to read the Guide for Parents, Admissions to Secondary School Booklet 2026/27, available at <a href="https://www.sheffield.gov.uk/schools-childcare/apply-school-place">https://www.sheffield.gov.uk/schools-childcare/apply-school-place</a>

I declare that all the information SIGNED (Parent)	ne information I have given is correct and true.									
PRINT FULL NAME (Parent)										
DATE	Day		Month		Year					

Please note: If a child is offered a place at a preferred school based on false or intentionally misleading information provided by you then the offer of the school may be withdrawn.

The <u>Admissions Committee</u> will consider supporting information from a professional and <u>may</u> prioritise your application for an oversubscribed school. It is your responsibility to send the documentation to the Admissions Team regarding additional information or change of address. If you are applying for <u>All Saints</u>, <u>Notre Dame or Parkwood</u> you must also submit the extra documents directly to each school.

Information contained in this form is personal data. It will be held on a computer and may be shared with schools and other services where necessary. The sharing of the information provided will then enable us to process your application. All information is subject to the Data Protection Act.