



Stanton Cross Admissions Form

Application Form for a Reception place at Stanton Cross Primary School for September 2022.

Before completing the application form, applicants should read <https://www.northnorthants.gov.uk/primary-school-places> which can be found on the School Admissions pages of the North Northamptonshire Council website.

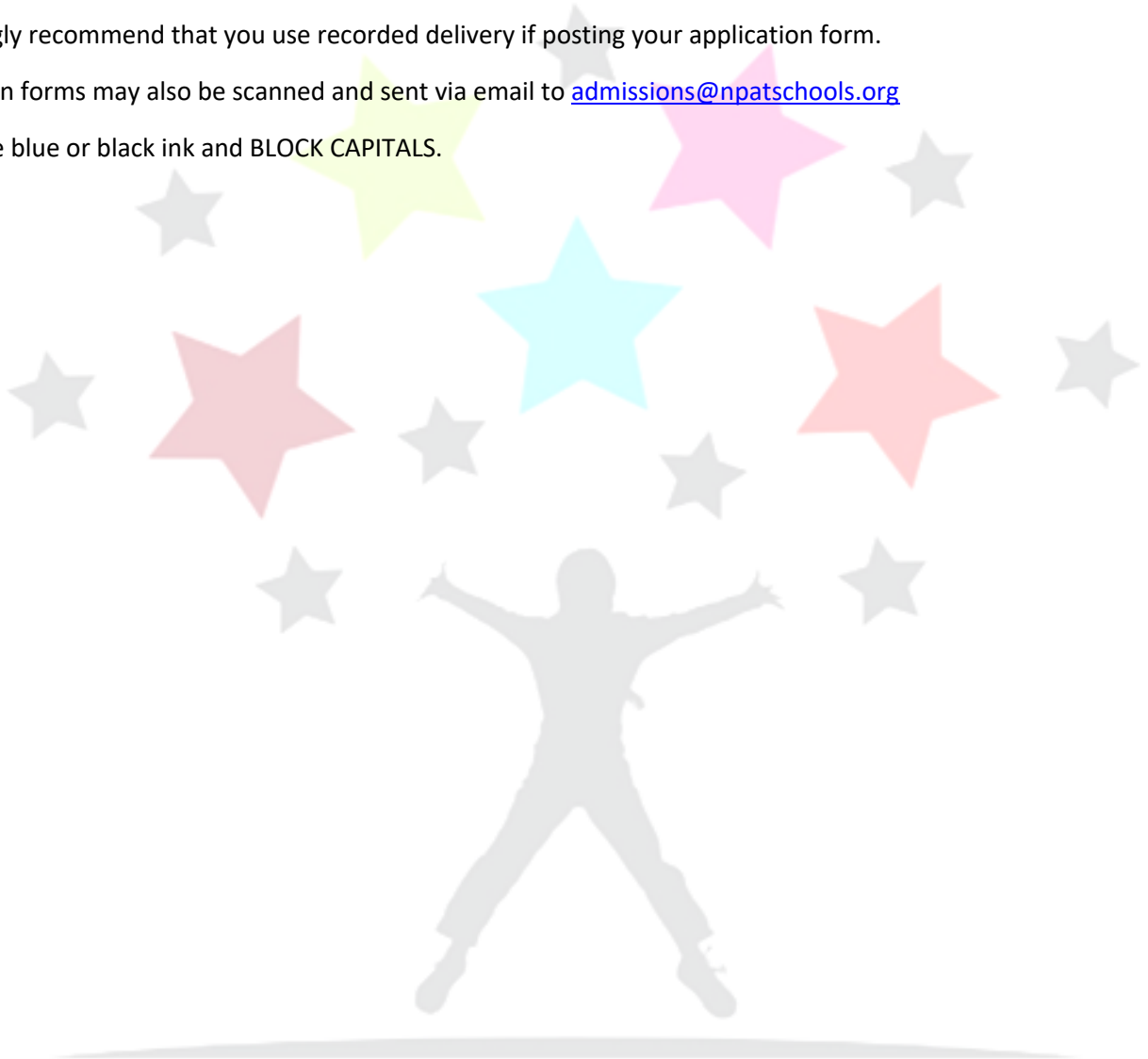
Completed application forms should be signed and returned to:

Stanton Cross Admissions – Reception 2022
Northampton Primary Academy Trust
Headlands Primary School
Bushland Rd
Northampton
NN32NS

We strongly recommend that you use recorded delivery if posting your application form.

Application forms may also be scanned and sent via email to admissions@npatschools.org

Please use blue or black ink and BLOCK CAPITALS.



Section 1: Child's Details

Legal Surname	
Chosen Surname (if different)	
First Name	
Middle Name/s	
Date of Birth (DD/MM/YYYY)	

Section 2: Child's Home Address

The child's home address is defined as the address at which the child normally resides with their parent/carer.

First line of address	
Second line of address	
Third line of address	
Village/Town	
Post Code	

Section 3: Looked after Children

Is the child currently in the care of a local authority (please tick)?

YES	<input type="checkbox"/>
NO	<input type="checkbox"/>

If yes, please give the name of the local authority

Was the child previously in the care of a local authority but immediately after this became subject to an adoption, child arrangements order or special guardianship order? Please note, this includes children who were in state care outside of England prior to adoption (please tick).

YES*	<input type="checkbox"/>
NO	<input type="checkbox"/>

*If yes, please provide a letter from the local authority that last looked after the child, confirming that they were looked after immediately prior to that order being made, or such evidence that demonstrates a child was in state care outside of England prior to being adopted.

Section 4: Additional Details

Are you applying for a place for your child on the basis of staff priority? Please name the parent recruited by the school:

Staff Name	Role

Does your child have a sibling/s attending the school? Please provide the sibling/s name and year group.

Sibling Name	Year Group

Section 5: Applicant Details

The applicant should be the person with parental responsibility for the child.

Surname	
First Name	
Address (if different from child's address)	
Telephone number	
Alternative telephone number	
Email address	

Relationship to child (please tick):

Mother	<input type="checkbox"/>	Step-mother	<input type="checkbox"/>	Grandmother	<input type="checkbox"/>	Foster parent	<input type="checkbox"/>	Other family member	<input type="checkbox"/>
Father	<input type="checkbox"/>	Step-father	<input type="checkbox"/>	Grandfather	<input checked="" type="checkbox"/>	Social Worker	<input type="checkbox"/>	Other	<input type="checkbox"/>

Section 7: Declaration

- I certify that I have parental responsibility for the child named in Section 1 who lives in Wellingborough and that the information given is true to the best of my knowledge and belief.
- I confirm that the information I have given on this form is covered by relevant Data Protection Legislation* and that the NPAT School Admissions team may contact the child's current school for information and share the information on this form with other professionals with NNC and other local authorities (in matters relating to Education).
- I understand that any fraudulent or deliberately misleading information given on this form and/or in any supporting information, may render this application invalid and may lead to an offer of a school place being withdrawn.

* Information contained in this form is personal data. It will be held electronically and is subject to the General Data Protection Regulations (GDPR) 2018.

Signature: _____

Name: _____

Date: _____

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