

Registration Form



Seaford College

Prep · Senior · Sixth Form

This form is to be completed by those with parental responsibility for the child and returned to: The Admissions Office, Seaford College, Petworth, West Sussex, GU28 0NB

Please complete, where relevant, all sections in this form.

Place Required:

Prep School (Years R-8)

Senior School (Years 9-11)

Sixth Form (Years 12 & 13)

Proposed Year Group:

Proposed date of entry (MM/YY):

Day/Boarding Status (All Years):

Day (Years R-13)

Flexi-Boarding (Years 6-13)

4 Day Boarding: Mon-Thurs - (Years 6-8)

Weekly Boarding (Years 9-13)

Full Boarding (Years 9-13)

Current School:

Name:

Address:

.....

Telephone No:

E-mail contact:

Name of Head Teacher:

Dates Attended:

.....

Is your current school aware that you are registering your child with Seaford College?

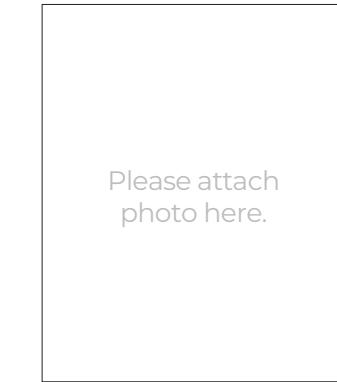
Yes:

No:

Do you have any fee arrears with your child's current school?

Yes:

No:



Please attach photo here.

Child's Details:

Surname:

Forename(s) (in full):

.....

Known as:

Date of birth:

Gender:

Nationality:

Ethnicity:

Home address:

.....

.....

.....

Home Postcode:

Home Tel No.:

As part of the admissions process, we will contact your child's school for a confidential reference

Personal Information and Individual Needs:

Does your child have a sibling who currently attends Seaford College?

Yes:

No:

Please outline your child's artistic, dramatic, musical or sporting skills, and their hobbies and interests (if applicable):

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.....
.....

Would you like to be sent information about Scholarships?

Yes:

No:

(Please note that this is only available for entrants to Year 3, 7, 9 & 12)

Do you wish to apply for supplementary means-tested bursarial support?

Yes:

No:

(Please note that bursaries are generally only available from Year 9)

Are there any circumstances relating to your child that we should be aware of?

Yes:

No:

Does your child have any medical conditions or disabilities?

Yes:

No:

Does your child have any special needs or learning difficulties?

Yes:

No:

Does your child have an Educational Psychologist report?

Yes:

No:

If Yes, please attach the report to this application form

Does your child have any court orders or ongoing safeguarding concerns?

Yes:

No:

If the answer to any of the above questions is yes, please give details on the blank space at the back of this application form.

Parents' Details:**Father*:**

Title:

Surname:

First Names:

Address:

.....
.....
.....

Postcode:

Occupation:

Nationality:

Home Phone:

Mobile Phone:

Work Phone:

E-mail:

Mother*:

Title:

Surname:

First Names:

Address:

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.....
.....

Postcode:

Occupation:

Nationality:

Home Phone:

Mobile Phone:

Work Phone:

E-mail:

*If you have parental responsibility for the child in a capacity other than as a parent of the child, please state your relationship to the child here:

.....
.....

Please insert any further information in this space that you feel is relevant/supports your child's application to Seaford College:

Marketing information: How did you hear about Seaford College?

Recommendation	<input type="checkbox"/>	Please give details:
Advert	<input type="checkbox"/>	
Website	<input type="checkbox"/>	