



THE ATAM ACADEMY APPLICATION FORM 2016

CHILD'S DETAILS

SURNAME:	
FIRST NAME:	MIDDLE NAME:
D.O.B.:	YEAR GROUP:
ADDRESS:	
POSTCODE:	
GENDER: FEMALE/MALE (please delete as necessary)	

PARENT/CARER DETAILS

TITLE:		
SURNAME:		
FIRST NAME:		
DAYTIME NUMBER:		MOBILE:
EVENING NUMBER:		
ADDRESS IF DIFFERENT TO CHILD:		
EMAIL ADDRESS:		

SIBLINGS ALSO APPLYING FOR THE ATAM ACADEMY

Full Name of brother/sister	Date of Birth	Year Group
Child 1		
Child 2		
Child 3		
Child 4		

OTHER RELEVANT INFORMATION

If the child is in public care/looked after by the local authority please state the authority and name of social worker/LA contact (this does not include childcare agreements)

Name of Authority:	
--------------------	--

You must return your completed application form to the school by 15 January 2016 at the address below.

Forms received after this date will be treated as late.

ADDITIONAL INFORMATION REQUIRED BY FAITH SCHOOLS

If you are applying on the grounds of the Sikh faith, then you will be required to provide the Supplementary Information. This should be sent by 'recorded delivery/signed for', to the address below by 15 January 2016. The recorded delivery/signed for method should indicate the date of postage, name and address of the sender and the delivery address:

**Admissions,
The Atam Academy
PO Box 2500, Ilford, IG1 8LE
Tel: 020 8252 9831
Email: info@atamacademy.com**

SIGNED BY PARENT/ CARER:

PLEASE PRINT FULL NAME:

RELATIONSHIP TO CHILD:

DATE:

We may pass the information you give on this form to schools inside or outside the borough or to other local education authorities as part of the admissions procedure. We will deal with any personal information you provide in line with the Data Protection Act 1998.