



Application for Enrolment

Please complete one application per child. Please print clearly.

PROPOSED DATE OF ENROLMENT _____ DAY BOARDING

PUPIL INFORMATION

Surname: _____

Forenames: _____

Preferred Name: _____

Date of Birth: _____

Gender: _____

Nationality: _____

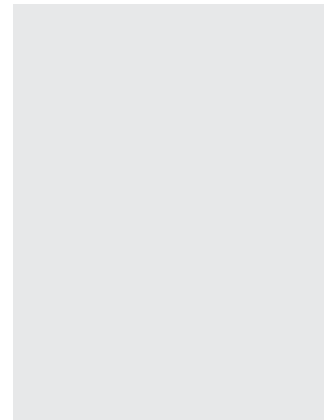
First Language: _____

Name & Address of Current School: _____

Telephone no: _____

Current School Attended from: _____

Current Year Group: _____



A passport sized photograph must accompany this application. Please attach to this box.

Has the pupil received any Support for Learning, either currently or in the past? If yes, please provide details and attach copies of reports from relevant professionals, such as Education Psychologist, Additional Support Plan. (Reasonable adjustments may be made at entry assessment stage where supported by formal evidence):

ADDITIONAL PUPIL INFORMATION

Please supply information on any existing relationship that you have with Dollar Academy e.g. siblings currently attending or applying to Dollar Academy, FP etc. Please provide details of any issues which may affect the applicant's school experience e.g. an illness or medical condition.

SUPPORTING DOCUMENTS

The following documents should accompany the Application for Enrolment form:

- Copy of pupil's Passport photo page
- Copy of pupil's birth certificate
- Passport sized photograph of pupil
- Copy of pupil's two most recent school reports
- Copies of reports from relevant professionals, such as Education Psychologist, Additional Support Plan (SEN report), if applicable.

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1

Relationship to Child: _____

Title: _____

Forenames: _____

Surname: _____

Address: _____

Postcode: _____

Home Tel: _____ Work Tel: _____

Mobile: _____

Email: _____

Occupation: _____

Member of HM Forces

Employee of FCO

Child lives at this address

Parent/Guardian 2

Relationship to Child: _____

Title: _____

Forenames: _____

Surname: _____

Address: _____

Postcode: _____

Home Tel: _____ Work Tel: _____

Mobile: _____

Email: _____

Occupation: _____

Member of HM Forces

Employee of FCO

Child lives at this address

Correspondence and information regarding admissions to be addressed to:

Parent/Guardian 1

Parent/Guardian 2

Both

MEANS-TESTED BURSARY APPLICATION FOR PUPILS ENTERING FORM I ONLY

I wish to apply for a place at Dollar Academy subject to the award of a bursary.

Please refer to the eligibility criteria and Note of Interest form on the Financial Assistance page www.dollaracademy.org.uk If you believe you qualify to make a bursary application please return the completed Note of Interest with this Application for Enrolment.

DECLARATION

I/We hereby apply for admission to Dollar Academy on behalf of _____ and in the event of enrolment, agree to conform to all school regulations.

I/We understand that as part of the admissions procedure Dollar Academy requires certain pieces of information in order to process the application. The details of why this information is necessary, how it will be processed, how and where it will be stored and for how long it will be retained are set out in the Dollar Academy Admissions Privacy Policy and Dollar Academy Retention Policy which can be found at www.dollaracademy.org.uk.

I/We understand that from time to time as part of the application process Dollar Academy may ask for copies of identification documents for the parents of the applicant, and if different, of those persons who intend to pay the school fees.

I/We understand that payment of the Registration Fee will not guarantee admission to the school. I/We authorise Dollar Academy to contact my child's current school to request a reference and/or to ensure no outstanding fees are due. (A Registration Fee of £60 should accompany this application – payable by cheque (drawn on a UK bank account payable to Dollar Academy) or by bank transfer.

N.B. A full term's notice is required before withdrawing a pupil, after accepting any place offered, otherwise a full term's fees will be charged in lieu of notice.

Signed: _____ Signed: _____ Date: _____

Please return this form, with enclosures, to: Admissions, Dollar Academy, DOLLAR, FK14 7DU

OFFICE USE ONLY:

Registration

Place Offered

Acceptance of Place Deposit

Receipt No:

Date:

Receipt No:

Date Received:

Contract Received: