



Liverpool College

YEAR 3 APPLICATION FORM for September 2019

There will be 30 new places available in Year 3 for the academic year beginning September 2019. To apply for one of these places please complete the details below and send this form with the paperwork requested by 15th February 2019.

For further details please see Liverpool College Admission Policy for September 2019 entry on the Admissions page of the website www.liverpoolcollege.org.uk

Child's details	
Surname:	
Forename(s):	
Date of birth:	/ / Gender: Male Female (please circle)

Parent or Guardian details	
Surname:	
Forename(s):	
Title (Mr/Mrs/Ms/Dr etc.):	
Address:	
	Postcode:
Contact Telephone Number :	
Email address: <i>This will be used to acknowledge receipt of application</i>	
Relationship to Child: (please tick appropriate box)	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian

Siblings at Liverpool College

Please give the name(s) of any sibling(s)** who will be pupils at Liverpool College on the date of admission.

***Please supply a photocopy of a recent utility bill as proof of residence**

**** Siblings include natural brothers or sisters, half brothers or sisters, step brothers or sisters, or legally adopted brothers or sisters who are living *with the same family at the same address* on the date of admission. Proof may be requested.**

About your child

Is the child a Looked After Child in the care of the Local Authority or been previously 'looked after' and has now been adopted by you (or become subject to a residence order or special guardianship order)?

Yes
(Please provide evidence)

No

Does your child have a statement of SEN or EHCP which names Liverpool College?

Yes
(Please provide evidence)

No

Are you employed by Liverpool College and have been employed continuously by the College for 2 years or more at the time of making this application?

Yes

No

Declaration

I declare the information on this form to be true and correct and agree that it can be subject to verification.

Signed (Parent/Guardian)

Print Name

Date:

PLEASE RETURN THIS FORM TOGETHER WITH A COPY OF A RECENT UTILITY BILL AS PROOF OF RESIDENCE.

THE DEADLINE FOR RECEIPT OF THE FORM IS : **FRIDAY 15th FEBRUARY 2019**

The form should be posted to: ADMISSIONS, LIVERPOOL COLLEGE, QUEENS DRIVE, LIVERPOOL, L18 8BG PLEASE DO NOT EMAIL THE FORM

We will acknowledge receipt of this form by email. If you don't receive an acknowledgement within a week of sending your form please get in touch 0151 724 4000 ext 3221