

YEAR 10 APPLICATION FORM for September 2018

There will be approximately 12 new places available in Year 10 for the academic year 2018. To apply for one of these places please complete the details below and send this form with the paperwork requested.

Child's details	
Surname:	
Forename(s):	
Date of birth:	<div style="display: flex; align-items: center; justify-content: space-around;"> / / </div> <div style="display: flex; align-items: center; justify-content: space-between;"> Gender: <div style="display: flex; gap: 10px;"> Male Female </div> (please circle) </div>
Current School	

****Please supply a photocopy of your child's birth certificate or passport with your application***

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)	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> Mother </div> <div style="text-align: center;"> <input type="checkbox"/> Father </div> <div style="text-align: center;"> <input type="checkbox"/> Guardian </div> </div>

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

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.

*** 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 YOUR CHILD'S BIRTH CERTIFICATE & PROOF OF RESIDENCE.

THE DEADLINE FOR RECEIPT OF THE FORM IS : **FRIDAY 20th April 2018**

The form can be handed in or 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 228

***THIS APPLICATION IS ONLY VALID FOR THE ACADEMIC YEAR 2018-2019.
IT WILL NOT BE CARRIED OVER TO 2019-2020***