#### WANDSWORTH COUNCIL CHILDREN'S SERVICES DEPARTMENT

### PRIMARY SCHOOL RECEPTION YEAR ADMISSION SEPTEMBER 2024



# **ADDITIONAL SCHOOL PREFERENCES FORM**

This form is for use by Wandsworth residents who have already applied for a primary school for September 2024 but wish to apply for further schools. If you have not previously made an application, please apply online at www.eadmissions.org.uk.

Family Name:	First Name:
Date of Birth:	Boy: Girl: (please tick)
Address:	I
	Postcode:
Have you changed address since your origin	nal application? YES/NO
If yes, please provide proof of address. Plea for details of acceptable documents.	ase see <a href="https://www.wandsworth.gov.uk/media/3702/proof_of_address.pdf">www.wandsworth.gov.uk/media/3702/proof_of_address.pdf</a>
DETAILS OF PARENT(S) OR CARER (	S) WITH WHOM THE CHILD LIVES
Family Name:	First Name:
Title:	Relationship to Child:
Mr / Mrs/ Miss/ Ms	
Contact telephone number:	Email:
outside of Wandsworth. Details of schools windsworth.gov.uk/apply-for-a-primar	hich you wish to apply in order of preference. This can include schools ith vacancies can be found at cy-school-place.
School 1.	Borough
1.	
2.	
3.	
4.	
4.	

### **ADDITIONAL INFORMATION**

## **Details of Siblings**

If your child already has an older brother or sister attending any of the schools listed above, please give details below:

Cou do not need to complete this question unless you wish to give reasons for your chere are exceptional medical or social reasons why your child should attend a part professionally supported evidence with this form to be considered on these ground wandsworth Primary School admissions brochure for further details.  DECLARATION AND SIGNATURE OF PARENT/CARER  I certify I am the person with parental responsibility for the child named above Wandsworth and that the information is true to the best of my knowledge and I wish to apply for a place at each of the schools named above and I have listed will take all reasonable steps to verify this and any other information I have province the province of the school of the school of the school of the province of the school of the province of the school	
Reasons for preference (optional) You do not need to complete this question unless you wish to give reasons for your there are exceptional medical or social reasons why your child should attend a part professionally supported evidence with this form to be considered on these ground wandsworth Primary School admissions brochure for further details.  DECLARATION AND SIGNATURE OF PARENT/CARER  I certify I am the person with parental responsibility for the child named above Wandsworth and that the information is true to the best of my knowledge and I wish to apply for a place at each of the schools named above and I have listed I confirm that the address provided on this form is my child's permanent reside will take all reasonable steps to verify this and any other information I have pro-	(please tick)
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may render this application invalid, or lead to the offer of a place being withdra	
Parent/Carer signature:	
	Date:
Print Name:	

Please return the completed form by email to admissions@wandsworth.gov.uk or by post to Pupil Services, Wandsworth Council Children's Services, Town Hall Extension, Wandsworth High Street, London SW18 2PU.