



This form is for children due to start Secondary School in September 2025. You can **only** apply using this form if you live at, or have proof, of a Dorset address. If you live in another local authority, including Bournemouth, Christchurch and Poole, you must contact that authority for details on how to apply for a school place.

**If your child has an Education, Health and Care Plan (previously known as a Statement of Special Educational Needs) you should not complete this application form.** Please contact the [Special Educational Needs and Disability Team](#) who can advise of the next steps.

Before submitting a form, please read the [Parents' Guide and the Admissions Policy](#). This will tell you what information you will need to provide and whether the school you are applying for has an additional form to complete. **Ensure you attach all supporting information to this form.**

If you need help with the application, please contact Dorset Direct 01305 221060 who can help you complete the form.

## Child's Details

Child's Legal Surname:	Child's Forename(s):	
Known as Surname: / / (if appropriate)	<input type="checkbox"/> Male/ <input type="checkbox"/> Female	Date of Birth:
Current School:		

## Address Details

Current Address:	Postcode:
Future/Previous Address (if moving house):	Postcode:
<b>(Expected) Date of Move:</b>	

### Please tick which address you would like your application to be considered from:

We can only base your application on your future address if you have supplied us with evidence of this address. See [Parents' Guide](#) for further information.

Current address       Future address

We aim to provide a school place at your highest preference wherever possible. However, there is no guarantee that you will get your preferred school. Even if you move into the catchment area the school may already be full. We advise all parents and guardians to consider naming more than one preference. You can contact the [School Admissions Team](#) to discuss availability, check your catchment school or if you need additional information.

## FIRST PREFERENCE SCHOOL

**School Name:**

Medical reasons (*You must Supply Evidence*)  Social Reasons (*Child Protection/ vulnerable Child*)  
  
Feeder School  Distance  Catchment Area  Sibling   
Religious (*You Must Supply Evidence*)  Ability or Aptitude Testing

## SECOND PREFERENCE SCHOOL

**School Name:**

Medical reasons (*You must Supply Evidence*)  Social Reasons (*Child Protection/ vulnerable Child*)  
  
Feeder School  Distance  Catchment Area  Sibling   
Religious (*You Must Supply Evidence*)  Ability or Aptitude Testing

## THIRD PREFERENCE SCHOOL

**School Name:**

Medical reasons (*You must Supply Evidence*)  Social Reasons (*Child Protection/ vulnerable Child*)  
  
Feeder School  Distance  Catchment Area  Sibling   
Religious (*You Must Supply Evidence*)  Ability or Aptitude Testing

**Any other reasons for your preferences (please specify which school):**

(continue on a separate sheet if necessary)

## Siblings

Child with multiple birth siblings (*twins, triplets etc*)

YES/  NO

Please provide details of any siblings and schools they are/will be attending

**NOTE:** Siblings must be identified as having the same home address (see [Parents' Guide](#) for clarification)

Child's Name: Date of Birth: School:

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## Religious/Faith Reasons

Are you involved with the life and worship of a church?

YES/  NO

If **YES**, please provide details of your vicar/priest/minister/leader:

Vicar/Minister's Name:

Address:

Name of Church attended:

Denomination:

Has your child been baptised/ christened?

YES/  NO

**Important:** Please check the admissions policy for the school you wish to apply for. The policy states clearly the evidence you need to send in, in order for us to consider your application under religious faith criteria and whether the school would like you to complete a supplementary information form.

*If this information is not received or endorsed, or is insufficient, your application will not be considered under these criteria, but will be considered under the next appropriate criteria.*

## Child in (or previously in) Care

These are children who have had a full or interim Care Order or children who are or have been accommodated under Section 20/22 of the Children Act 1989. This includes children who have been subject to an adoption, residence or special guardianship order.

Is this application for a Child **currently** in Care?  YES/  NO

Is this application for a Child **previously** in Care?  YES/  NO

If **YES**, to which Local Authority:

Has a multi-agency team identified your child's needs?

YES/  NO

Does your child have any disability of which a school should be aware of where adaptations to the school or specialist equipment would be required?

YES/  NO

Is your child the subject of child protection issues?

YES/  NO

If you have answered YES to any of the above **please provide details:**

(continue on a separate sheet if necessary)



The closing date for the first round of allocations is **31 October 2024**. If you submit your application before this date a letter will be sent to you on **3 March 2025** advising you of the outcome.

Applications received between the **1 November 2024 – 2 March 2025** will be considered in our late round and you will be informed of the outcome on the **2 April 2025**.

Applications received after the **2 March 2025** will be dealt with as they are received as In-Year applications.

Please submit your form by doing one of the following:

**Email** to: [admissions@dorsetcouncil.gov.uk](mailto:admissions@dorsetcouncil.gov.uk)

**Post** to: School Admissions Team

Dorset Council

County Hall

Colliton Park

Dorchester

Dorset

DT1 1XJ

Please note: It is the parent/carer's responsibility to ensure that the completed application form and ALL supporting documents arrive safely. If you would like a receipt of your posted application form, please provide a stamped addressed envelope with this application. If you hand this in at a school you may wish to ask for a receipt.

**Please contact School Admissions if you need this form in Braille, large type or another language.**