The Royal School









school achievement award

PLEASE WRITE IN BLOCK CAPITALS

The Great Park Windsor, Berkshire. SL4 2HP Headteacher: Mrs. C.R. Jones

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OFFICE USE

SCHOOL INFORMATION FORM [SIF] (2015-2016)

CHILD'S SURNAME	WGP / SIB / CON REC'D ENTRY BIRTH CERT / ID SEEN CHURCH ATTENDANCE	
RELIGION	FORMCATEGORY No	
ADDRESS:		
POST CODE:		
TELEPHONE NUMBER:		
E-MAIL ADDRESS:		
IS THE CHILD LOOKED AFTER BY THE LOCAL AUTHORITY?		
DOES THE CHILD HAVE A STATEMENT OF EDUCATIONAL NEEDS?		



FAMILY DETAILS	Parent/Carer 1	Parent/Carer 2
PARENT/CARER NAME		
RELIGION		
Please indicate which Admissions Policy Category Number applies for your child to be considered for admission to The Royal School		
If applying under the sibling category please supply the name and dates of attendance for the sibling below.		
SIBLING NAME	Da	ites of attendance
SIGNED		DATE

(Parent /Carer)