

Parental request for entry to Year 7 for Summer born children where their chronological age is Year 8.

This form is for parents of summer born children, that is children born between 1 April to 31 August, to seek approval for their child to be admitted out of their normal age group to Year 7 in September (rather than their chronological age group)

All parents and carers who are making an application in which Cotham School is named must complete this form and submit it to:

(by post or in person)	(by email)
Admissions Cotham School Cotham Lawn Road Bristol BS6 6DT	admissions@cotham.bristol.sch.uk

Please note, this request is not an application for admission. A separate application for admission must be made in the usual way at the appropriate time. We strongly encourage parents to make requests for admission outside normal age group well ahead of any deadlines for applying for admission, so that a decision in principle can be obtained and informed choices made.

About the child	
Child's legal forename	
Child's legal surname	
Child's date of birth	
Child's gender	
Child's address	
Child's normal year group	
Year group sought for child	
About you	
Parent or carer name (Forename and Surname)	
Parent's address (if different to the above)	
Parent's phone number	
Parent's email address	

Please set out below your reasons for asking for the child to be admitted to a year group outside their normal year group:

You should have regard to the following factors which the School's Admission Committee will take into account when considering whether or not to agree your request in principle:

- Information about the child's academic, social and emotional development;
- Where relevant, the child's medical history and the views of their medical professional;
- Whether the child has previously been educated outside their normal age group;
- Whether the child may naturally have fallen into a lower age group if it were not for being born prematurely.

This is not an exhaustive list - you should provide any other information you believe is relevant to your request.

Please list below documentation you have attached in support of your request:
(for example, a letter/report from the child's GP, hospital consultant or other medical professional, social worker, home tutor, nursery teacher, etc.)

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I confirm that the information provided on this form is true and accurate.

Signed:

Full legal name:

Dated: