

# YESOIDAY HATORAH GIRLS' ACADEMY

## IN-YEAR APPLICATION FORM

Please complete the following application form in black ink in block capitals:

### PUPIL

Child's surname .....

Child's first name(s) .....

Child's date of birth .....

Child's address .....

.....

Postcode .....

### PARENT/CARER

Parent/carer's full name .....

Parent/carer's address .....

(if different to the above) .....

Postcode .....

Parent/carer's contact numbers .....

Parent/carer's email address .....

### OTHER INFORMATION

Is the child a "looked-after" or 'previously looked after' child?  YES  NO

If yes, please enclose supporting evidence from the professional dealing with your case.

Does the child have a sibling living at the same address who is currently in Yesoiday HaTorah Girls' Academy or Yesoiday HaTorah Boys' Academy?  YES  NO

If YES, please give the name and class of the sibling(s):

Name ..... Class .....

Name ..... Class .....

Name ..... Class .....

Proposed class of entry .....

Proposed start date ..... / ..... / .....  
DAY MONTH YEAR

**NOTES**

Please return this form with proof of residence such as a recent Council Tax demand or a utilities bill (not more than 6 months old) with your name and address. Where a child regularly lives with one parent for part of a week and with the other parent for the rest of the week, the permanent address for Distance Tie-Break purposes will be the address at which the child lives for the greater part of the school week, i.e. Monday to Friday and it is that address that should be shown on the demand or bill.

If you are applying for a faith priority place please ensure the Supplementary Information Form is also completed and returned to the school. It is your responsibility to arrange for this document to be submitted with your application. Priority cannot be given without it.

Places will be allocated in reliance on the information provided. If any of that information is incorrect and the place would not have been offered if it had been correct, the offer may be withdrawn. The Governing Body reserves the right to make further enquiries and require further evidence if it reasonably believes that incorrect information may have been given.

**DECLARATION**

I wish the above applicant to be considered for a place as a pupil at Yesoiday Hatorah Girls’ Academy and declare that the above information is true and correct in every detail. I understand that if a place has been obtained on the basis of incorrect or inaccurate information and the place would not have been offered had the information been correct or accurate, the offer will be withdrawn.

Signature of Parent/Carer .....

Name of Parent/Carer .....

Date .....

**Please return this Application Form and the Yesoiday Hatorah Supplementary Information Form to:**

**Admissions Officer  
Yesoiday HaTorah Multi-Academy Trust  
Sedgley Park Road  
Prestwich M25 0JW  
Manchester**