

Headteacher: Mr G Murray saintjohnfishercc.co.uk 01782 307551 office-sjfcc@ctkcc.co.uk



St. John Fisher Catholic College Ashfields New Road Newcastle under Lyme Staffordshire, ST5 2SJ

Mid-Term Transfer Student Application Form – Student Details				
Child's Surname:		Male/Female (please delete as applicable	e)	
Child's Forename (s):	T	(1	-, 	
Date of Birth:	Age:	Current Year Group:		
Name of Parent/Carer:				
Address (Please include Postcode):				
If you are moving house please tell us your new address and planned moving date:				
Telephone Number:				
Email address:				
Does your child have any additional educational needs, such as a Statement or EHCP (Educational Health Care Plan)? If yes, please provide details:				
Is your child a Baptised Catholic?	Yes/No (please d	elete as applicable)		
If yes, please state Catholic Church where baptism took place and date of baptism:	Church/Diocese:	Date:		
If your child is not a Baptised Catholic, please state to which denomination or faith, if any, your child belongs:				
Does your child have a sibling currently attending St John Fisher Catholic College? (This includes full, half, step brothers and sisters who are living at the same address and are part of the same family unit)				
Looked After and previously Looked After Children: Is your child currently looked after?	Yes/No (please d	elete as applicable) – If yes, p	lease	
is your child currently looked after:		:		
Has your child previously been looked after?	Social Worker:			
	Tel No			
	Yes/No (please d provide details:	lelete as applicable) – If yes, p	olease	
Is either parent of your child a serving member of the armed forces:	Yes/No (please d	lelete as applicable)		













School Name:				
Address:				
Talanhana Niyeshan				
Telephone Number:	VEC (NO /slage delate as			
Has your child ever received a fixed term exclusion or been permanently excluded from school?	YES / NO (please delete as applicable) If YES, please give details.			
Date your child last attended this school:				
Please provide the reason(s) for requesting a change of school:				
Please note that this information	I understand that the information given may be shared with the current school.			
may be shared with your child's current school	YES/NO (please delete as applicable)			
I confirm that I have Parental Responsibility and care of the child, and that the child lives				
withme. Name:				
Signed:	Date			
Please circle as appropriate				
My relationship to the child is: parer	nt / carer / foster carer / other (please give detail)			

Please complete and return this form to <a href="mailto:admissions.sjfcc@ctkcc.co.uk">admissions.sjfcc@ctkcc.co.uk</a>

or by post to:

Admissions
Saint John Fisher Catholic College
Ashfields New Road
Newcastle under Lyme
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