



EMMAUS SCHOOL

School Lane, Staverton, Trowbridge,
Wiltshire, BA14 6NZ

Tel: 01225 782684

Email: info@emmaus-school.org.uk

www.emmaus-school.org.uk

Application for Pupil Admission - TRANSFER

First Names:	Surname:
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Name Used:	Sex: M / F	Date of Birth:	Year:
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Address:	Home Tel. Number:
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Year & Term When Admission is Sought:

Relevant School History:	
Name & Address of Present/Most Recent School:	Number of Years Attended:
	Head Teacher's Name:
	Class and/or Form Teacher:
	School Telephone Number:

Please give details of any known special educational needs:

Please give details of any relevant medical history:
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Names of Other Children in the Family:			
Name	Sex	Date of Birth	School (if applicable) and Year

How did you hear about Emmaus School:

Names of Parents/Guardians with whom Applicant Resides & Relationship:

1. Name:

Relationship to Child (eg. Father/Legal Guardian/Step Father):

Mobile Tel. Number:

Email Address:

Occupation:

Work Telephone Number:

2. Name:

Relationship to Child (eg. Mother/Legal Guardian/Step Mother):

Mobile Tel. Number:

Email Address:

Occupation:

Work Telephone Number:

Name of Father/Mother/Other Person with Legal Responsibility for Applicant:

Name:

Relationship to Child:

Address:

Home Tel. Number:

Mobile Tel. Number:

Email Address:

Occupation:

Work Telephone Number:

REASONS for Application (continue on a separate sheet if necessary):

Do You Worship Regularly at a Church and if so, which Church:

Yes / No:

Persons From Whom References may be Sought.

Please list contact details for your Church Leader/Minister as well as one other 'professional' referee:

1. Name & Address:

2. Name & Address:

Email Address:

Email Address:

Tel. Number:

Tel. Number:

A non-refundable administration fee of £75 must accompany this application (£25 for each additional child). Please make cheques payable to Emmaus School.

SIGNATURES of Parents/Legal Guardians:

I/We have read the School's doctrinal basis and agree to my/our child being educated in accordance with it. I/We wish to apply for a place for my/our child at Emmaus School and understand that an offer will be made only at the Headteacher's discretion.

Father/Legal Guardian: _____

Date: _____

Mother/Legal Guardian: _____

Date: _____