



Grace Academy Darlaston

SUPPLEMENTARY INFORMATION FORM FOR MID YEAR ADMISSION TO GRACE
ACADEMY DARLASTON

This form needs to be completed fully and sent to Grace Academy Darlaston before a decision can be made. Please return the completed form to Grace Academy Darlaston, Herberts Park Road, Darlaston, Wednesbury, WS10 8QJ. You can also email the form to gad.admissions@darlaston.graceacademy.org.uk

Child's Surname	Child's First name	
Boy or Girl	Date of birth	
Full name of Parent/Carer		
Current home address including postcode		
Contact telephone number		
Current/Previous schools attended in the last two years		
Date last attended school and name of the school		
Does your child have a sibling who is currently in attendance at Grace Academy Darlaston? Please state their name(s) and date(s) of birth		
If applicable please circle the criteria under which your application is being made	Child in Public Care	YES/NO
	EHCP	YES/NO
Has your child previously been excluded from any school/academy? (this includes fixed term exclusions and permanent exclusions)	Yes	If yes please give details/duration and reasons.
	No	

I certify that to the best of my knowledge the information given in this form is correct and true.

.....sign or print name

.....dated