

# APPLICATION FORM

## Senior School



IF COMPLETING THIS FORM BY HAND, PLEASE WRITE IN BLOCK CAPITALS

### STUDENT DETAILS

Surname:					Date of Birth:	
Forenames:					Nationality:	
Name by which the student is known:					Home Language:	
Gender:			Proposed start date:	[e.g. Sept 2020]		
Type of Place:	Day <input type="checkbox"/>	Day BNO <input type="checkbox"/>	Part Weekly Boarding <input type="checkbox"/>	Full/Weekly Boarding <input type="checkbox"/>		
Year group applying to enter:	7 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>	10 <input type="checkbox"/>	12 <input type="checkbox"/>	Pre A-Level Course* <input type="checkbox"/>

\* The Pre A-Level Course is for International Students aged 15/16 years whose first language isn't English and who need to become proficient and confident working in English before starting the 2 year A-Level Course.

### STUDENT'S CURRENT/PREVIOUS SCHOOLS

Name of current school:			
Full name of Headteacher/Principal:			
Postal address:			
School administrative email address:			
Other schools attended from the age of 5:	School name:	Dates attended:	Reason for leaving:

### PARENT / GUARDIAN DETAILS (Please print or type clearly)

Parent / Guardian 1		Parent / Guardian 2	
Surname:		Surname:	
Forename:		Forename:	
Relationship to student:		Relationship to student:	
Home telephone:		Home telephone:	
Mobile telephone:		Mobile telephone:	
Email:		Email:	
Full address (including postcode):		Full address (including postcode) - if different to Parent 1:	
The Student's home address: <input type="checkbox"/>		The Student's home address: <input type="checkbox"/>	
Parental responsibility:	Both Parents jointly <input type="checkbox"/>	Parent/Guardian 1 <input type="checkbox"/>	Parent/Guardian 2 <input type="checkbox"/>
Please indicate preferred main contact, if applicable, and any special instructions for correspondence:			
If you would like us to email you our weekly website newsletter, please tick this box <input type="checkbox"/>			<b>[Please continue over]</b>

## MEDICAL, EMOTIONAL AND LEARNING SUPPORT

Please provide details of any medical condition, behavioural, emotional and/or social issues that the School should be made aware of:

Does the student currently receive any additional learning support?: Yes  No  (please tick as appropriate)  
If yes, please give details:

If yes, please read the School's Learning Support Policy on the School Website [www.boothamschool.com](http://www.boothamschool.com) under: Further Information>Policies> Senior School Policies

Has the student ever been assessed by an Educational Psychologist?: Yes  No  (please tick as appropriate)

If yes, please enclose a copy of the Educational Psychologist's report when submitting this application

## FAMILY LINKS WITH THE SCHOOL OR ANY QUAKER ORGANISATION

Does your family have any other connection with Bootham School? Please give details of current or former students:

Does your family have any links with any Quaker organisation (e.g. school or Meeting House?)

## BURSARY AND SCHOLARSHIP AWARDS

Details of current Bursary and Scholarship Awards can be found on our website ([www.boothamschool.com](http://www.boothamschool.com)) under Admissions → Fees

Please indicate below if you wish to apply for any of the following:

Music Award (for entry to Years 7 (11+) and 9 (13+)):

Sixth Form (for entry to Year 12 (16+)) Means Tested Academic Scholarship:

Means Tested Bursary (non-Quaker families) (for entry to Years 7 (11+) and 9 (13+)):

Means Tested Quaker Bursary:  (You can apply for a Quaker Bursary if you are a regular, longstanding member / attender of a Monthly Meeting)

**A non-refundable registration fee of £75 (£50 for a sibling) is required to complete the application. Cheques should be made payable to 'Bootham School'. If paying by bank transfer, please use the bank details below:**

### Bootham School bank details:

Bank name: Co-operative Bank  
Account name: Bootham School  
Sort code: 08-90-72  
A/C No.: 70138504  
IBAN No: GB18CPBK 089072 70138504  
Swift No: CPBK GB22

**Please tick one of the following:**

**I/we have paid by bank transfer**

**A cheque is enclosed**

## DECLARATION

By submitting this form, we are applying for a place at the School. We understand that submission of this form does not bind us to send our child to the School, or bind the School to accept the child as a student. We understand that the School may hold personal information under the terms of the Data Protection Act 1998, and that this information will be used for School purposes only.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print name : \_\_\_\_\_

**PLEASE COMPLETE THIS FORM IN FULL AND RETURN VIA EMAIL TO THE ADMISSIONS DEPARTMENT:**

[admissions@boothamschool.com](mailto:admissions@boothamschool.com) (Tel: 01904 623261)