



Admission Form

2025 - 2026 Academic Year

0161 740 7248



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| Application for (please tick): | | Year Group: | | | |
|--------------------------------|--------------------------|-------------------------|--------------------------|--------------------------|--------------------------|
| King David High School | <input type="checkbox"/> | Yavneh Boys High School | <input type="checkbox"/> | Yavneh Girls High School | <input type="checkbox"/> |
| KD High School Sixth Form | <input type="checkbox"/> | Yavneh Boys Sixth Form | <input type="checkbox"/> | Yavneh Girls Sixth Form | <input type="checkbox"/> |

Forename:

Address:

Preferred forename:

.....

Middle name:

Town:

Legal Surname:

Postcode:

Preferred surname:

Gender at birth:

Date of Birth:

Preferred gender:

Emergency Contacts

Please list all parents, guardians, and anyone else we should contact in an emergency:

| Name | Relationship | Phone number | Email | Home Address |
|------|--------------|--------------|-------|--------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Previous School (If coming from abroad please give details of any previous UK school):

.....

Siblings:

.....

Attended King David? *Please circle:* Yes/No

.....

Attended King David? *Please circle:* Yes/No

Are you a member of/do you attend a synagogue? *(Please circle)*

Yes

No

If yes: Name of synagogue:
 Attendance Since:
 How often do you attend synagogue?:

| Please write details for any additional needs that apply to your child below: | |
|---|--|
| Dietary: | |
| SEN Support/EHCP: | |
| Paramedical Support eg. Occupational Therapy/Physiotherapy/Speech Therapy: | |
| Medical Conditions: | |
| NHS Number & GP Surgery: | |
| Disability: | |
| Allergies: | |
| Any additional information: | |

Ethnicity:

Religion:

Home Language:

First Language:

English as Additional Language: *(Please circle)*

Yes /No

If the pupil falls into any of the below categories, please tick and provide details:

| | | |
|----------------------------------|--------------------------|--------------------------|
| Service Child | <input type="checkbox"/> | |
| Eligible for Free School Meals | <input type="checkbox"/> | If yes, which authority? |
| Previously had Free School Meals | <input type="checkbox"/> | If yes, which authority? |
| Asylum Status | <input type="checkbox"/> | |
| Traveller Status | <input type="checkbox"/> | |
| In Care | <input type="checkbox"/> | |
| Is a Young Carer | <input type="checkbox"/> | |

Consents for Pupil and Parent/Carer to complete

All of the King David High School's Policies can be found on our website:

<https://www.kdhs.org.uk/pol.html>

1. I agree to support and uphold the School Uniform Policy

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

2. I give consent for photography of the pupil and the use of images during the course of the school year for the school's social media platforms & promotional materials

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

3. I will support the religious ethos of the school

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

4. I agree to abide by the school rules and the behaviour policy

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

5. I consent to the Youth Service Support Provider Access Policy

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

6. I consent to the school including my child in the fingerprint biometric process.

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

7. I consent to the school's Behaviour and Reward Policy.

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

8. I consent to the school's Mobile Phone and Devices Policy.

Parent Signature

Pupil Signature

Name in Capitals

Name in Capitals

Date

Date

The school collects and processes personal data in accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. We have a duty to protect this information, keep it accurate and up to date, and may share it with the Local Authority, the Department for Education (DfE), and other relevant bodies where required by law.

Parent/Carer Signature

Date:

For official use only:

Member of staff conducting admission interview, please complete the following:

Start date:

Year Group:

Reg Group:

Class sets:

Option choices for Y10, Y11, Y12 or Y13:

Copy of GCSE Certificates required for Y12 or Y13 students: Copied YES/NO

To follow (passed to, to follow up)

UCI Number for 6th form student:

EAL document below to be completed if applicable and forwarded to SEND/EAL Co-Ordinator and Exams Officer

Additional Information:

EAL - only if applicable - Staff please ask parents the following questions and circle either YES or No:

EAL Pupil application form - awarding extra time during examinations

- The candidate's first language is not English, Irish or Welsh: YES/NO
- The candidate entered the United Kingdom within three years of the examination(s) with no prior knowledge of the English Language: YES/NO
- English is not one of the languages spoken in the family home: YES/NO
- prior to their arrival in the United Kingdom the candidate was not educated in an International school where some or the entire curriculum was delivered in English: YES/NO
- Prior to their arrival in the United Kingdom the candidate was not prepared for or entered for IGCSE qualification where the question papers were set in English: YES/NO
- Prior to their arrival in the United Kingdom the candidate was not prepared in English for other qualifications, eg IELTS qualifications, Preliminary English Tests: YES/NO
- The candidate has to refer to the bilingual translation dictionary so often that examination time is used for this purpose, delaying the answering of questions: YES/NO
- The provision of 10% extra time reflects the candidate's usual way of working with the dictionary. (A definition of normal way of working is provided within Chapter 4, paragraph 4.2.5.) YES/NO

EAL Additional Information:

Benefits

We want to make sure that we are providing your child with the best education and support we can. Healthy school food has obvious health benefits and can help pupils establish healthy habits for life. Healthy school food can also help to improve pupils' readiness to learn.

Families who receive certain benefits may be eligible for free school meals. Your child is eligible for free school meals if you're in receipt of one of the following benefits:

- Universal Credit with an annual net earned income of no more than £7,400
- Income Support
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance
- Support under Part 6 of the Immigration and Asylum Act 1999
- The guaranteed element of Pension Credit
- Working Tax Credit run-on (paid for the four weeks after you stop qualifying for Working Tax Credit)
- Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190

Registering for free meals could also raise an extra **£900** for your child's secondary school, to fund valuable support like extra tuition, additional teaching staff or after school activities.

This additional money is available from central government for every child whose parent is receiving one of the benefits listed above.

To check if your child is eligible, we need information about you and your child. Please complete this form and return to the school office.

About your child/children

| Child's Last Name | Child's First Name | Child's Date of Birth | | | Name of School |
|-------------------|--------------------|-----------------------|----|------|----------------|
| | | DD | MM | YYYY | |
| | | DD | MM | YYYY | |
| | | DD | MM | YYYY | |

Parent/carer details

| | Parent/Guardian 1 | | | | Parent/Guardian 2 | | | |
|--|-------------------|----|------|---|-------------------|----|------|---|
| Last name | | | | | | | | |
| First Name | | | | | | | | |
| Date of Birth | DD | MM | YYYY | | DD | MM | YYYY | |
| National Insurance Number* | | | | | | | | |
| National Asylum Support Service (NASS) Number* | | / | | / | | / | | / |
| Daytime Telephone Number | | | | | | | | |
| Mobile Number | | | | | | | | |
| Address | | | | | | | | |
| | Postcode: | | | | Postcode: | | | |

Family income and benefit details

If you receive any of the benefits listed below, please place an X in this box.

- Income Support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support from NASS under part 6 of the Immigration and Asylum Act 1999
- the guarantee element of Pension Credit
- Child Tax Credit (with no Working Tax Credit)
- Working Tax Credit run-on
- Universal Credit

Universal Credit

If you are in receipt of **Universal Credit**, is your net earned family income over £7,400 per year? (Please place an X in the appropriate box).

Your net earned income is your household income after taxes and deductions. It does **not** include income through Universal Credit or other benefits that you may receive.

Yes No Unsure

Child Tax Credit

If you are in receipt of **Child Tax Credit**, is your joint gross annual income over £16,190 per year?
(Please place an X in the appropriate box).

Yes No Unsure

If you're not sure whether you receive one of the listed benefits, or what your household income is, but you would still like us to check whether your child is eligible for free school meals, please place an X in this box.

Declaration

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for free school meals. I also agree to notify the local authority in writing of any change in my family's financial circumstances as set out in this form.

Signature of parent/carer:

Date:

Thank you for completing this form and helping to make sure your child's school is as well funded as possible.

How the information in this form will be used

The information you provide in this form will be used by the council to confirm receipt of one of the listed welfare benefits. Once this is confirmed, this helps to decide how much money your child's school will receive each year.

The information will also be used in relation to pupils in year 3 or above to decide whether they are eligible for free school meals.

You only need to complete this form once and it will last for the duration of your child's time at their current school. You should contact the school or local authority if you have a change in financial circumstances.

We are committed to ensuring that the personal and sensitive information that we hold about you is protected and kept safe and secure, and we have measures in place to prevent the loss, misuse or alteration of your personal information. We will use the information you provide to assess entitlement to free school meals. The information may also be shared with other Council departments to offer benefits and services.