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**Application Form**

**For office use only**

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D.O.B: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application received on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration fee paid: Yes No Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Year Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Waiting list Year Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sibling in school: Yes No Sibling on Waiting List:

MMPS MIGSG KD Yes No

**Application for Admissions**

**All information given will be held in line with GDPR regulation.**

Please tick the relevant box to indicate the year group you are applying for.

 Nursery Reception Year 1  Year 2 

 Year 3  Year 4  Year 5  Year 6 

**Personal Details –** To be completed by those with parental responsibility for the child. Please use BLOCK CAPITALS.

|  |  |
| --- | --- |
| Child’s surname: |  |
| Forename in full: |  |
| Middle name(s): |  | Preferred name: |  |
| Date of Birth |  | Current School Year  |  |
| Is English your first language? | Yes  No  | If not, please state your child’s first language |  |

|  |  |  |
| --- | --- | --- |
|  | Parent /Carer 1(Contact Priority 1) | Parent /Carer 2(Contact Priority 2) |
| Surname : |  |  |
| Forename in full: |  |  |
| Relationship to child: |  |  |
| Address: |  Postcode:  | Postcode:  |
| Home telephone: |  |  |
| Mobile number: |  |  |
| E-mail address: |  |  |

Do you have joint / sole parental responsibility for your child? Joint Sole

**Sibling Information**

Are there any siblings already at MMPS? Please provide details below:

|  |  |  |
| --- | --- | --- |
| Child’s name | DOB | Year Group |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| Child’s name | DOB | Year Group |
|  |  |  |
|  |  |  |
|  |  |  |

Are there any siblings already on the MMPS waiting list? Please provide details below:

Does your child have any siblings at the following schools?

KD Grammar for Boys Yes No

Child/Children name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Group(s): \_\_\_\_\_\_\_\_\_\_\_\_\_

Manchester Islamic Grammar School for Girls Yes No

Child/Children name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Group(s): \_\_\_\_\_\_\_\_\_\_\_\_\_

Was either parent a pupil/student of: MMPS MIGSG KD Grammar

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Group \_\_\_\_\_\_\_\_\_\_\_ Date finished \_\_\_\_\_\_\_\_\_\_\_

**Last School/Nursery Attended/ing**

|  |  |
| --- | --- |
| Name of the School/Nursery: |  |
| Date started at current school: |  | School email address |  |
| School Address: |  |
| Postcode: |  | School telephone |  |

**Additional Information**

Are there any special educational needs or disabilities relating to your child, which the school should be aware of? We ask for this information at the point of application to ensure that all necessary provision can be put in place for assessment. Yes No

If yes, then please provide information below:

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\*Please enclose copy of the most recent educational psychologist’s report if you have one. Please also send us any relevant medical special needs or other educational reports you may have.

The Early Years Foundation Stage (EYFS) requires that every child between the ages of 2-3 years should have their development assessed and evaluated. (Nursery & Reception Applications)

Has your child had their 2 year development check? Yes No

If yes, please enclose a copy of your child’s 2 year development summative report with this application.

**Information in case of Emergency**

|  |  |  |
| --- | --- | --- |
|  | (Contact Priority 1) | (Contact Priority 2) |
| Full name : |  |  |
| Relationship to child: |  |  |
| Home telephone: |  |  |
| Mobile number: |  |  |

I/we hereby give permission for any member of the school staff to administer First Aid or take my child to the hospital should the need arise; however, I/we will not hold the school responsible for the implementation of the above.

Signature: Date:

**Documents**

|  |  |
| --- | --- |
| I have included a copy of my child’s latest full school report with this application. | Yes No |
| To confirm my child’s date of birth, I have included a copy of his/her birth certificate with this application | Yes No |
| I have paid £50 non-refundable registration fee by bank transfer | Yes No |
| Please provide the bank transfer reference used (See details below) |  |

|  |
| --- |
| **MMPS Bank Details** |
| Bank Name: | Royal Bank of Scotland |
| Account name:  | **Manchester Islamic Educational Trust LTD**  |
| Account number: | 10094347 |
| Sort code:  | 16-34-27 |
| Bank Reference | Child Name – £50 Registration Fee 23-24 |

**Declaration**

I/ We apply for admission of my/our child to this school and certify that all the above details are correct to the best of my / our knowledge and I / we undertake to honour in full the requirements of my/our child’s agreed study programme and all the schools rules and regulations.

I / We fully understand that entry from one year to the next is not automatic but dependent upon my / our child’s performance and my / our co-operation in implementing fully the school policies and adhere to the schools Islamic ethos.

I / We fully understand that it is my / our duty to inform the school of any changes in the application including change of address or contact telephone numbers. Furthermore, I / we understand that not undertaking this task may result in forfeiture of a place at the school.

Both parents with parental responsibility to sign and complete below:

|  |  |
| --- | --- |
| First Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name in full \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to the childMother Mother by marriageGrandmother Other \_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Second Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name in full \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to the childFather Father by marriageGrandfather Other \_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

If only one person who has parental responsibility has signed the above, the reason must be stated below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Full Name:

Signature: Date:

How did you hear about MMPS?

Family/Friends Leaflet Internet/Website

Other - Please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Data Notice**

The personal data on this form is required for the performance of a contract between you and Manchester Muslim Preparatory School (551 Wilmslow Road, M20 4BA) and also enables the school to fulfil its legal obligations under the Equality Act 2010. The information may be shared with your child’s current school or educational establishment for the purposes of requesting a reference or seeking information about outstanding fees or supplemental charges. By completing this form, you accept these terms and conditions. You have a right to request access to, rectification or erasure of, restriction or processing of, or to object processing of your child’s personal data by us and to submit a data portability request by contacting us at admissions@mmps.miet.uk. If you believe your personal data is being processed in a manner incompatible with this privacy statement, then you have a right to complain to the Information Commissioner’s Office.

If you would like more information about how Manchester Muslim Preparatory school uses your personal data then you will find a copy of our school privacy notice at [www.mmps.miet.uk](http://www.mmps.miet.uk)

Full Name:

Signature: Date:

We prefer to communicate via email and would appreciate it if you would add admissions@mmps.miet.uk to your address book to prevent our emails from being filtered as spam.