



HIGHFIELD COMMUNITY PRIMARY SCHOOL

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IN YEAR SCHOOL TRANSFER

APPLYING FOR A PLACE AT HIGHFIELD COMMUNITY PRIMARY SCHOOL

CHILD'S NAME.....

DATE OF BIRTH..... **GENDER**.....

CURRENT ADDRESS.....

.....

TELEPHONE NUMBER.....

EMAIL ADDRESS.....

ARE YOU MOVING TO A NEW ADDRESS

DATE PLACE REQUIRED.....

SCHOOL CURRENTLY ATTENDING.....

DATE CHILD LEFT/WILL LEAVE.....

REASON FOR CHANGING SCHOOL.....

HAS THE CHILD'S CURRENT PREVIOUS SCHOOL BEEN ADVISED OF THE APPLICATION

CONTACT NAME.....

CONTACT PHONE NUMBER/S.....

RELATIONSHIP TO CHILD.....

For office use only

Confirmed place.....

Start date.....

SAM updated.....

