



FOUNDED IN 1487

No: _____

STOCKPORT GRAMMAR SCHOOL

APPLICATION FOR ADMISSION TO SENIOR SCHOOL IN 2024

Please complete in BLOCK CAPITALS

Pupil's Surname		Date of Birth	
First Name/s (please underline name known by)		Male/Female	
Pupil's Address Postcode		
Nationality		Religion	
Is English the child's first language?	Yes/No* If no <i>please state language</i>		

Father's Surname/Last name	Title	Address (if different from pupil) Postcode
First Name		
Mobile Telephone		
Home Telephone		
Occupation		
Email address		

Mother's Surname/Last name	Title	Address (if different from pupil) Postcode
First Name		
Mobile Telephone		
Home Telephone		
Occupation		
Email address		

Present School	School use only:

Have you registered your child's name at any other school/s? If so, which?

Financial Assistance <i>If you wish to be considered for means tested financial assistance under the School's Bursary Policy, please tick the box</i>	
Music Scholarship <i>If you would like to apply for a Music Scholarship (subject to audition) Please tick the box</i>	

Please name any close relatives, who are at present or who have been pupils at Stockport Grammar School, giving relationship to applicant, forenames and appropriate dates:

Please outline any of your child's artistic, dramatic, musical or sporting skills or experience (if applicable)

Please give an outline of your child's other hobbies or interests

Please provide us with details of any medical condition/s

On signing this form, you give consent to any administration of medication as may be considered necessary by medically qualified persons, and any First Aid deemed necessary whilst in the School.

Allergies **Epipen Y/N**

Dietary Requirements

Disabilities

Learning Difficulties

Please submit a copy of any SEN reports previously obtained with the application form, or mail to admissions@stockportgrammar.co.uk

Notes: Offers of places are subject to availability and the admission requirements of the School at the time offers are made. A copy of the current edition of the terms and conditions will be supplied on request.

Declaration: We request that the name of my/our son/daughter be registered as a prospective pupil and enclose a cheque for the £75 registration fee. We understand that the terms and conditions of the School will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the School. We understand also that the School (through the Bursar, as the person responsible) may in accordance with the requirements of the Data Protection Act 1998 obtain, process and hold personal information about our child, including sensitive information such as medical details, and we consent to this for the purposes of assessment, and if a place is later offered, in order to safeguard and promote the welfare of the child.

First Signature:	Second Signature:
Name in full:	Name in full:
Relationship to child:	Relationship to child:
Date:	Date:

Email: admissions@stockportgrammar.co.uk
 Stockport Grammar School: a company limited by guarantee
 Regional Address: Buxton Road, Stockport SK2 7AF