**The closing date for applications is Friday 31 October 2025**

**ADM2**

🖰 APPLY ONLINE

**When you apply online at** [**www.lancashire.gov.uk/schools**](http://www.lancashire.gov.uk/schools) **you will:**

* **Receive an email acknowledgement when you press the submit button**
* **Be able to change your application up to the closing date**
* **Be able to view your offer on the offer date**

***Please remember to press the 'submit' button each time you view your online application, (even if no changes are made).***



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| For office use | | | | | | | |
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Apply online OR complete and return this form to your Area Education Office (see website/booklet for address)

Please use black ink and write clearly in block capitals

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| **Admission to Secondary Schools 2026-27** |
| **Application Form** |
| **THIS APPLICATION FORM IS FOR COMPLETION BY PARENTS RESIDENT IN LANCASHIRE.**  **Before completing this form all parents are strongly advised to read the secondary school admissions information on the Lancashire County Council webpages at** [www.lancashire.gov.uk/schools](http://www.lancashire.gov.uk/schools)  **If you need advice on how to complete an application please contact your Area Education Office** |

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| **Part 1 – information about the child** | | | | | | | | | | | | | | | | | | |
| **1** | **Name of child** | | **Surname** | | |  | | | **Forename(s)** | | |  | | | | | | |
| **2** | **Date of birth** | Date | | Month | | | Year | **Boy** | | **🞏** | **Girl** | | | **🞏** | **Twin / Triplet** | | **🞏** | ***(please tick)*** |
| **3** | **Primary School** | | | |  | | | | | | | | **Tel No.** | | |  | | |

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| **4** | 1. **Name of parent(s)/guardian(s)** | | |  | | |
|  | 1. **Address** | |  | | | |
|  | **Postcode** |  | | | **Tel no** |  |
|  | **Email** | |  | | | |
| **5** | **Which council charges Council Tax for the address where your child lives?** | | | | | |

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| **6** | **If the child is not living permanently with the above parent(s )/ guardian(s) please give:** | | | | | |
|  | 1. **Name of person child usually lives with** | | |  | | |
|  | 1. **Address** | |  | | | |
|  | **Postcode** |  | | | **Tel No** |  |
|  | **Date when child started living with person at address in 6(b)** | | | | | |
| *If there is a shared parenting arrangement both parents must confirm the details* ***at the outset*** *at question 13 (part 2) of this form (see the secondary admission booklet, Section 2, paragraph H)* | | | | | | |

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| **7** | **Details of siblings who will be attending secondary school on 1 September 2026** *(Brothers & sisters, stepchildren, half brothers & sisters, adopted & foster children living with the same family at the same address.)* | | | | |
|  | **Name** | **Date of Birth** | **School** | **Female 🞏** | **Male 🞏** |
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| **Part 2 – Additional Information** | | | | | | | | | | |
| **8** | **Does the child have a final statement for special needs (EHC Plan)** | | | | | | | | **Yes 🞏** | **No 🞏** |
|  | **Is the child known to an Educational Psychologist?** | | | | | | | | **Yes 🞏** | **No 🞏** |
| **9** | **Do you consider your child to have a disability?** *If yes, please give description* | | | | **Yes 🞏** | **No 🞏** | **Description** | | | |
| **10a** | **Is the child in care to any local authority?** | | | | | | | | **Yes 🞏** | **No 🞏** |
| **10b** | **Was the child previously in care and now adopted?** | | | | | | | | **Yes 🞏** | **No 🞏** |
| **10c** | **Is there a residence, guardianship or accommodation order?** | | | | | | | | **Yes 🞏** | **No 🞏** |
|  | **Name of relevant Local Authority** | | |  | | | | | | |
|  | **Name of Social Worker** | | |  | | | | | | |
| **11** | **Is the child subject to a private fostering arrangement?** | | | | | | | | **Yes 🞏** | **No 🞏** |
|  | **Contact agency** | |  | | | **Tel No** | |  | | |
| **12** | **Does a parent / guardian work at any of your school preferences?** | | | | | | | | **Yes 🞏** | **No 🞏** |
|  | **Name** |  | | | | **School** | |  | | |
|  | **Name** |  | | | | **School** | |  | | |
| **13** | **Additional information to support your application may be provided here.**  *This can be medical, social or welfare information relating to the pupil and / or the family. Evidence from an appropriate professional (e.g. doctor, health visitor, social worker) can be attached. Please continue on a separate sheet if necessary.*  **Please do not include religious information in this section – see part 3 below \*** | | | | | | | | | |
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| **Part 3 – Statement of Preferences** | | | | | | |
| Please state clearly your 3 secondary preferences for the child. All secondary preferences will be considered equally. You are therefore **strongly advised** to use all 3 preferences and to name 3 different establishments.  Where more than one offer would be possible, the school which has an available place and which you have ranked highest priority will become the single offer.  **Your list of preferences may include schools within or outside of Lancashire. Your preferences may include Community and Voluntary Controlled Schools, Voluntary Aided Schools, Free Schools, Foundation Schools and Academies.**  **Independent / Private Schools must not be included.** | | | | | | |
| **I/ We, being the parent(s) / guardian(s) of the child named in part 1, would prefer him/her to be considered for admission to the following secondary schools / academies in priority order:** | | | | | | |
| **First** |  | | | | | |
| **Second** |  | | | | | |
| **Third** |  | | | | | |
| **\* Do you have any religious affiliation?** | | **Yes 🞏** | **No 🞏** | **Is your child baptised Catholic?** | **Yes 🞏** | **No 🞏** |
| If YES you should contact any Voluntary Aided or Foundation School which is included as a preference and obtain their supplementary information form (this is in addition to the formal application process). | | | | | | |

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| **14** | **Signature (s)** | | | |
| **I / We have read the secondary school information for parents and certify that the information given on this form is correct.**  **The Local Authority reserves the right to verify the information given on this form. Any offer of a place will be on the basis that the information provided is accurate.** | | | | |
|  | **Parent / Carer** |  | **Date** |  |
|  | **Parent / Carer** |  | **Date** |  |
| **If you apply on a paper form it is your responsibility to ensure that this is submitted to the Local Authority by 31 October 2025. Please ask for a receipt.** | | | | |