

Headteacher: Ms A Fearon BA (Hons) MA NPQH Chair of Governors: Mr L Clark

SUPPLEMENTARY INFORMATION FORM FOR ADMISSION IN 2024/2025

This form should be completed when applying for a place at Hazelwick School, **only if you meet the following conditions:**

• Your child has a parent, step parent, adoptive parent or carer who is employed by Hazelwick School

PLEASE NOTE: You <u>must</u> also complete and return a Common Application Form (available from and returnable to West Sussex). You can do this online at <u>www.westsussex.gov.uk/admissions</u>

Please complete all sections of the Hazelwick Supplementary Information Form below using BLOCK CAPITALS for handwritten responses. If the form is not completed, applications will be considered only on the basis of information provided to the Local Authority.

Surname of child		
Forename(s) of child		
Male or female		
Date of birth		
Child's home address*		
Post Code		
*This should be a residential	property that is the home address alre	ady recorded on the Local
Authority's database.		
Does your child have a parent, step-parent, adoptive parent or carer who works for Hazelwick School		Yes *
		No
*Full name of parent who wo	rks at Hazelwick School:	
I confirm that I have complet	ed or will complete a Local Authority (Common Application Form
	•	Yes No

must notify Hazelwick School immediately if there is any change to these details and that should an information I have given prove false, the Governors may withdraw any offer of a place even if the cl has already started school.		
Signature	Date	
Please return this form to Mrs Howland, Hazelwick School, H Crawley, RH10 1SX or by email to thowland@hazelwick.org.uk	azelwick School Close, Three Bridges,	

I confirm that the information I have given on this form is accurate and truthful. I understand that I