



St. Nicolas' CE Combined School Taplow

Rectory Road, Taplow, Bucks SL6 0ET

Tel: 01628 603759

E Mail: schooloffice@stnicolastaplow.com

Website: www.stnicolastaplow.com

Headteacher: Ms R Holmes

In Year Application Form 2027-28

This form should be returned directly to the school with supporting evidence if necessary as detailed below.

Child's Details	
First Name(s)	
Legal Surname	
Date of Birth	
Male / Female	
Year Group	

Home Address (The address and postcode at which the child normally lives)
Please provide address evidence such as a recent utility bill.

If you are moving home, please provide the new home address below:
Please provide evidence i.e. solicitor's letter confirming exchange.

Details of Parent/Carer making the application	
Name	
Relationship to child	
Email address (please print)	
Home Phone Number	
Mobile Number	



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Date admission required:	
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If any of the following apply to your application, please provide the following required evidence/documentation directly to the school.

Your child has a statement of special needs Please provide a copy of the child's Statement of SEN	Y / N Undergoing assessment
You are applying on behalf of a 'Looked After Child' or a child who was looked after but ceased to be so because they were adopted or became subject to a residence order or special guardianship order. Please provide a letter from the child's social worker	Y / N
You, or your child, have exceptional medical or social reasons why he/she should attend this school? Please provide written support from an appropriate professional such as a senior medical consultant, health visitor or senior social worker who is aware of you/your child's case.	Y / N
Your child has a sibling who is in attendance at the point of admission or who left Year 6 at the end of the school year prior to entry. Please complete the details below:	Y / N
Sibling's Full Name:	
Sibling's DOB:	

Signed _____

Date _____

Please return this form directly to the school office for the attention of Mr S Warren

