WEST HATCH HIGH SCHOOL - EVIDENCE OF ADDRESS FORM FOR ENTRY IN YEAR 7 - SEPTEMBER 2020

*** Please ensure you have completed your Local Authority Online Application ***

OHILD	S FORENAMES (in full):			DATE OF BIRTH:							
SURNAME: GENDER: Male / Female (please circle)											
	SS:main residence as define										
				POSTCODE:							
Primar	y School:		Phone Numbe	er:							
Mother	: (Mrs/Ms/Miss/Other) F	orename		Surname							
Home ⁻	Геlephone:		Mobile Numb	ber:							
Email /	Address:										
Father:	(Mr/Other)) Forename	e	Surna	ıme							
Home ⁻	Геlephone:	M	lobile Numbe	r:							
Email /	Address:										
Local A	Authority serving addres	ss of child's main r	-	oping Forest / Redbridge / Other lease circle)							
Do you	rent this property? Y	es / No (please	circle)								
If yes, µ	olease provide a copy of y	our tenancy agreen	nent/recent sta	atement							
Tenano	y From (date)		To (date)								
Please	provide the following mos	t recent within the	last six mont	<u>hs</u> :							
Origina	al Council Tax Bill 🔲 1	「wo Original utility	bills 🔲 C	Child's Original Birth Certificate							
	s, Electric, Water - <u>printec</u> ncludes current home add		nline accounts	accepted, TV licence, Driving Licen							
Cibling				urrently in Year 7-11, or Year 12,							
	he brother or sister compl	otod thon otaldiory									

6.	DECLARATION: I enclose the documents requested for my son/daughter, including a recent Original Council Tax Bill and Two recent Original Utility bills covering a period within the last six months. I declare the above facts to be true and understand and accept the admissions arrangements as outlined in the school's prospectus. I will provide any further documentation that the Governors of the Admissions Committee may request and understand that the Committee reserves the right to deem this application invalid, or to withdraw a place offered, if any information provided in this application proves to be inaccurate.														clare the ions ation			
	Signed (Parent): Print Name:																	
	Date:																	
	OUR CLOSING DATE IS FRIDAY 8th NOVEMBER 2019: Your completed form and all original documents should be sent by post, preferably via Recorded Delivery, or brought into the school in person by this date. Your original documents will be photocopied and returned to you and will be acknowledged by letter with a reference number.														rson			
	Contact: Admissions Secretary, West Hatch High School, High Road, Chigwell, Essex IG7 5BT																	
	PLEASE NOTE This is not an application form; however, you must complete this form if you name West													est				
	Hatch High School as one of your preferences on your Local Authority Common Application Form																	
	To apply to your Local Authority go online to:																	
	Essex County Council Residents Website: www.essex.gov.uk The deadline is 31/10/2019 London Borough of Redbridge Residents Website: www.redbridge.gov.uk The deadline is 31/10/19																	
For Office Use Only																		
	Internal Form No:																	
	Date R	Receive	ed:															
	CT/BC	/UBs C	Checke	d:														
	Date A	cknow	ledged															
	PAA]	LAC	SEN	Sta	Sib	SC	Α	В	C1	C2	D1	D2	Е	F	G	Н	0
	Yes		1	JOZ. (Ola	0				-	-				<u> </u>			
	No		<u> </u>	<u> </u>														
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