



# CONFIDENTIAL RIPON GRAMMAR SCHOOL



## APPLICATION FORM FOR YEAR 9 ENTRY

### Pupil Details

**Name of Pupil(a)** Surname : .....

(b) First forename : .....

(c) Second forename(s) : .....

Please indicate if your child is known by their second forename.

(d) Legal Surname : .....  
(if different)

**Date of birth** (DD/MM/YY) : ..... **Gender** Male  Female

**Address (in full) where child resides:** .....

..... Postcode: .....

Home telephone: ..... Mobile telephone (optional).....

**Present school attended** **Dates of attendance**

..... **From:** (MM/YY) .....

### Details (in full) of parents/guardians who live at above address:

Title : .....

Forename : .....

Surname : .....

Relationship to child: .....

Mobile phone No: .....

Work telephone No: .....

Email address: .....

Are you applying for a boarding place for your child? Yes  No

If Yes, please complete and return the attached 'Suitability for Boarding' form.

Please tick this box if either parent/guardian is a member of the armed forces



Please write a brief statement about why you wish your child to join RGS:

Does your child have any Special Educational Needs (SEN):

**I hereby make application for the admission of my son / daughter to Ripon Grammar School**

Signature : .....

Date : .....

***Please return this form to: Examinations Office, Ripon Grammar School, Clothholme Road,  
Ripon, North Yorkshire HG4 2DG***

***Deadline for Applications: 31<sup>st</sup> January***

**Please state below how you became aware of the year 9 entrance test**

Newspaper Advertisement

Word of mouth

North Yorkshire Country Council

Other (please specify below)

Ripon Grammar School Website