



Carlton Bolling Admissions Supplementary Information Form (SIF)

Introduction:

All students wishing to apply for a Year 7 at Carlton Bolling from the 2027/28 intake, must complete this Supplementary Information Form to enter their child for the Fair Banding assessment. It must be returned to school by Monday 21st September 2026. It can be delivered by hand or emailed.

Hard copies of the SIF can be obtained from the school or on the school's website.

Returning Completed SIF Forms

Completed forms can be returned:

- Delivered by hand to the school (including Year 6 Open Evening)
- By post: Carlton Bolling, Undercliffe Lane, Bradford BD3 0DU. We strongly recommend recorded delivery postage.
- Email: admissions@cb.catrust.uk



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CARLTON BOLLING SUPPLEMENTARY INFORMATION FORM

Please complete the form in full, and in CAPITAL LETTERS.

Child Details

First Name:

Surname:

Gender (Male or Female):

Date of birth:

Entitled to Free School Meals (Yes or No):

Home Address (including postcode)

CURRENT PRIMARY SCHOOL:

Parent/Carer Details

Title (Mr, Mrs, Miss etc):

First Name:

Surname:

Telephone (Mobile):

Email:

Siblings

- a) If your child has another sibling (brother or sister) applying to this year group at Carlton Bolling, please state their full name & date of birth (eg, twins/triplets):

Note: Separate applications are required for each sibling.

- b) If your child has another sibling (brother or sister) *currently* attending Carlton Bolling, please provide their full name and date of birth.

Children of Staff:

If you are, or will be a member of Carlton Bolling staff at the admission date, please provide details of your name and role below:

Medical Needs *during the assessment*

Please provide details of any relevant medical conditions i.e. asthma, epilepsy that may need to be managed **during your child's Fair Banding Assessment:**

Support *during the assessment*

Please provide details of any learning, or social needs that may be required for your child to complete the Fair Banding Assessment:

Current EHCP:

Has your child a CURRENT EHCP in place? Yes/ No

If yes, please provide details below (please do not include anything that is not an acknowledged diagnosis on this form)

Availability for Fair Banding Assessment

- a) Is your child available to complete the Fair Banding Assessment on Saturday 26th September 2026?

Yes / No (Please circle as appropriate)

- b) If unavailable for the Fair Banding Assessment, please provide reasons:

(Reasons will be considered and contact will be made with the parent/carer prior the assessment taking place. If alternative arrangements can be made these will be communicated with parents/carers).

Signature of Parent or Carer:

Name (block capitals):

Date:



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**RECEIPT OF COMPLETED Carlton Bolling Admissions Supplementary Information
Form (SIF) TO BE GIVEN TO PARENT**

Date form returned –

Initials of staff member accepting the form -