



Carlton Bolling Admissions Supplementary Information Form (SIF)

Introduction:

All students wishing to apply for a Year 7 place at Carlton Bolling must complete this Supplementary Information Form to enter their child for the Fair Banding assessment.

For entry in 2027/28, the completed online SIF must be completed by September 21st, 2026. It will submit automatically once completed.

Hard copies of the SIF can be obtained from the school, or we can support an online application in school if required.

Returning Completed SIF Forms

If you complete the online form (Admission Form Online), this will submit directly to the admissions team.

If you have printed off a copy & completed manually, you can return in one of the following ways:

- 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

Please note that all forms must be either submitted or received in school by the deadline stated above.

The most secure way of submitting your application is by completing the online



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)

Has your child previously been looked after (PLAC) or is currently looked after (LAC)?

Yes/ No

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:



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

Name of Child (BLOCK CAPITALS) –

Date form returned –

Initials of staff member accepting the form -