

APPLICATION FOR ADMISSION TO ALTRINCHAM GRAMMAR SCHOOL FOR GIRLS

Entrance Examination Saturday 18 September 2010

To be returned to:

The Admissions Secretary, Altrincham Grammar School for Girls, Cavendish Road, Bowdon, Altrincham, Cheshire, WA14 2NL **as soon as possible**, but no later than **Friday 27 August 2010**, together with

2 passport sized photographs, with name and date of birth on the back and an A5

stamped addressed envelope. Please complete this form in capital letters in either blue or black ink. If you have any queries about the form, please contact the Admissions Secretary on 0161 912 5912.

APPLICATION FORM

General Details

1. Surname of child _____ First Names _____

2. Date of Birth _____ Age at 1 September 2011 _____
(Girls should have a date of birth between 1 September 1999 and 31 August 2000)

3. Home address _____

_____ Post Code _____

4. Name of Parent(s) or Guardian(s) to whom correspondence should be addressed

5. Telephone numbers: Home _____ Work _____ Mobile _____

6. Name and address of present school attended _____

7. Does your daughter have a sister who is currently attending Altrincham Grammar School for Girls and who will still be attending the school next September? YES/NO*

If yes, please give name _____

8. Does your home lie within the AGGS catchment area as defined in the School's Admissions Policy?

YES/NO/DON'T KNOW (Please delete as appropriate).

NB In past years places have been available to girls living outside the Altrincham district.

I/We certify that the above information is correct and authorise Altrincham Grammar School for Girls to check any data in order to establish that the details given herein are accurate. I/We understand that a fraudulent application may lead to the withdrawal of a place.

Signed _____ Date _____

Please print name(s) _____