

WANDSWORTH COUNCIL CHILDREN'S SERVICES DEPARTMENT

TRANSFER TO SECONDARY SCHOOL SEPTEMBER 2026



## ADDITIONAL SCHOOL PREFERENCES FORM

This form is for use by Wandsworth residents who have already applied for a secondary school for September 2026 but wish to apply for further schools. If you have not previously made an application, please apply online at <https://www.eadmissions.org.uk/>.

### DETAILS OF CHILD

Family Name:	First Name:
Date of Birth:	Boy: <input type="checkbox"/> Girl: <input type="checkbox"/> (please tick)
Address:	
Postcode:	
Have you changed address since your original application? YES/NO (please circle) If yes, please provide proof of address. Please see <a href="https://wandsworth.gov.uk/media/3702/proof_of_address.pdf">https://wandsworth.gov.uk/media/3702/proof_of_address.pdf</a> for details of acceptable documents.	

### DETAILS OF PARENT(S) OR CARER (S) WITH WHOM THE CHILD LIVES

Family Name:	First Name:
Title: Mr / Mrs/ Miss/ Ms	Relationship to Child:
Contact telephone number:	Email:

### ADDITIONAL SECONDARY SCHOOL PREFERENCES

Please list below the additional schools for which you wish to apply in order of preference. This can include schools outside of Wandsworth. Details of schools with vacancies can be found at [www.wandsworth.gov.uk/apply-for-a-secondary-school-place/](http://www.wandsworth.gov.uk/apply-for-a-secondary-school-place/).

School	Borough
1.	
2.	
3.	
4.	
5.	
6.	

## ADDITIONAL INFORMATION

### Details of Siblings

If your child already has an older brother or sister attending any of the schools listed above, please give details below:

<b>Family Name:</b>	<b>First Name:</b>
<b>Date of Birth:</b>	<b>Boy:</b> <input type="checkbox"/> <b>Girl:</b> <input type="checkbox"/> (please tick)
<b>School:</b>	

### Reasons for preference (optional)

You do not need to complete this question unless you wish to give reasons for your preference of school. If you think there are exceptional medical or social reasons why your child should attend a particular school, you should provide professionally supported evidence with this form to be considered on these grounds. Please see the [www.wandsworth.gov.uk/admissions](http://www.wandsworth.gov.uk/admissions) for further details.

### DECLARATION AND SIGNATURE OF PARENT/CARER

- I certify I am the person with parental responsibility for the child named above who lives in the Borough of Wandsworth and that the information is true to the best of my knowledge and belief.
- I wish to apply for a place at each of the schools named above and I have listed these schools in order of preference.
- I confirm that the address provided on this form is my child’s permanent residence and that Wandsworth Council will take all reasonable steps to verify this and any other information I have provided on this form.
- I understand that any false or deliberately misleading information given on this form and/or supporting information may render this application invalid, or lead to the offer of a place being withdrawn.

<b>Parent/Carer signature:</b>	<b>Date:</b>
<b>Print Name:</b>	

Please return the completed for by email to [admissions@wandsworth.gov.uk](mailto:admissions@wandsworth.gov.uk) or by post to Pupil Services, Wandsworth Council Children's Services, Town Hall Extension, Wandsworth High Street, London, SW18 2PU.