



Supplementary Information Form for Admission

APPLICATION BY APTITUDE FOR SPORT

FOR ACADEMIC YEAR 2026/27

THIS FORM IS IN ADDITION TO THE LOCAL AUTHORITY FORM AND SHOULD BE
RETURNED BY MONDAY 6TH OCTOBER 2025 BY 3.00PM

APTITUDE TESTS WILL BE HELD ON **SATURDAY 11TH OCTOBER 2025 AT 9.00AM**
FOR THOSE INVITED – PLEASE KEEP THIS FREE

1. Name of Child: Surname:
Forename:

[NB: please give your child's **legal surname**. This will appear on all school records. If you prefer your child to be known informally in school by a different name, please indicate preferred surname in brackets]

2. Date of Birth: Gender:

3. Address:.....
.....
.....Postcode:.....

4. Email address:

5. Contact telephone number:

6. Does the applicant have a brother/sister currently at Shenfield High School?

YES/NO

If YES, please give the name(s), date(s) of entry and current form:

7. Sports aptitude tests and performing arts audition dates will be published annually. You will be contacted with further information following receipt of your application. Each applicant will have **one** sports aptitude test or audition.



SHENFIELD HIGH SCHOOL SPORTS ACADEMY

ADDITIONAL INFORMATION

PLEASE NOTE THIS FORM IS **ADDITIONAL** TO THE LOCAL AUTHORITY APPLICATION FORM AND SUPPLEMENTARY INFORMATION FORM

To be completed by Parent/Guardian

Name of Child

Primary School

Address

.....

Name of Headteacher

Name and address of another person we may ask for a reference about your child's ability and interest in sport.

Name

Address

.....

Daytime Tel No Relationship to child

Please rank the top 3 sporting specialisms of your child

Invasion Games
eg football, netball

Net Games
eg Tennis, Badminton

Striking Games
eg cricket, golf

Swimming

Athletics

Gymnastics

You may supply information on other sports if your child has an aptitude for more than 2 areas

Favourite Sport:

Level Played and current clubs:

.....

Hours training per week:

Position (if applicable):

Areas of strength:

.....

.....

Future Ambitions:

.....

2nd Favourite Sport:

Level Played and current clubs:

.....

Hours training per week:

Position (if applicable):

Areas of strength:

.....

.....

Future Ambitions:

.....

Any further evidence of your sporting commitment and talent which we should be aware of:

.....
.....
.....
.....
.....

STATEMENT

By applying for a selected placement based on aptitude in sports, children and their parents are making a commitment to the full involvement of that child in sports curriculum and extra-curricular programme. Selected pupils will be expected to work hard at all their subjects in the national curriculum, as well as at their specialism in Sports. The school encourages all pupils to achieve their full potential and with those selected, their talents in the sports will be developed to levels of excellence. This will be in the context of the education of the whole child. A partnership between school and home therefore is essential if a pupil is to succeed to the best of their ability.

Please read the above statement carefully. It is the school's commitment to those selected. In this section we would like you to make a short statement giving reasons for applying for a selected place and what you are hoping to gain from attending the Junior Sports Academy.

CHILD'S STATEMENT

PARENT'S STATEMENT

Parent/Guardian's signature **Date**

PLEASE NOTE YOU **MUST** SUBMIT A LOCAL AUTHORITY APPLICATION FORM TO YOUR LOCAL AUTHORITY

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RETURNED BY MONDAY 6TH OCTOBER 2025 AT 3.00pm TO

**MR G SAPSFORD - DIRECTOR OF SPORT
JUNIOR SPORTS ACADEMY
SHENFIELD HIGH SCHOOL
Alexander Lane
Shenfield
CM15 8RY**

All communication will be by email.