



For Office Use Only <b>Reference No:</b>

**Supplementary Information Form**  
Year 7 Application for  
**Northampton School**  
for September 2026

Pupil's First Name:	
Pupil's Surname/Family Name:	
Pupil's Date of Birth (dd/mm/yyyy):	
Pupil's Permanent Address:	
Post Code:	
Home Telephone Number:	Current School:

**Parent/Guardian Details:**

*\*Please print clearly and delete those which do not apply*

<i>*Mr/Mrs/Ms/Miss/Other (please specify)</i>	<i>*Mr/Mrs/Ms/Miss/Other (please specify)</i>
First Name:	First Name:
Surname:	Surname:
Address if different from above:	Address if different from above:
Daytime Telephone Number:	Daytime Telephone Number:

**Ability Test will take place on Saturday, 15 November 2025**

Aptitude Tests will take place as follows:

Sport: From w/b 13<sup>th</sup> October 2025

Performing Arts: From w/b 13<sup>th</sup> October 2025

Music: Monday 20<sup>th</sup> October 2025

**Aptitude test times can be booked via Eventbrite**

*Please turn over ..*

## **SUPPLEMENTARY INFORMATION**

- 1) Is your child in the care of the Local Authority (a Looked After Child) or were they previously a Looked After Child? (*i.e. after being in the care of the Local Authority they became subject to an adoption, child arrangements or special guardianship order. This includes children who were in state care outside of England but ceased to be in state care as a result of being adopted*)  
(*if yes, please attach a copy of the relevant court order*) (Delete as appropriate) Yes/No
- 
- 2) Will you be applying to the school under the Free School Meals criterion? Yes / No
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- 3) Are you currently an employee of Northampton School, and fulfil either or both of the conditions described under oversubscription criterion 3 of the Admissions Policy? (Delete as appropriate) Yes / No
- 
- 4) Do you already have a child currently at Northampton School or Northampton School for Boys who will be on roll on 31 October 2025? (Delete as appropriate) Yes / No  
If YES please give his/her name: \_\_\_\_\_ Form \_\_\_\_\_  
(*if more than one, name the youngest*)
- 
- 5) Will you be applying to the school under Aptitude criterion? Yes / No
- 
- 6) Do you believe that you live within the defined catchment area of the school? Yes / No
- 
- 7) Does your child have an Education, Health and Care Plan (EHCP)? Yes / No  
(*if yes, please attach a copy*)

**NOTE:** If your child has a formal written **Education, Health and Care Plan** you must complete this form by responding above **and also** contact the SENDCO at their present school or the Local Authority at: West Northamptonshire Council, One Angel Square, Angel Street, Northampton, NN1 1ED. Email: EHCNorthampton.NCC@westnorthants.gov.uk

Please note that completion and submission of this form cannot be regarded as any guarantee of a place. If the school is oversubscribed the admissions criteria will be applied to allocate places. Please refer to our website for further details.

**Please return this form to Northampton School, c/o Northampton School for Boys, Billing Road, Northampton NN1 5RT, by midnight on Friday 31 October 2025**

**ALL** students applying for a place at Northampton School will need to sit the **Common Ability Test** on **Saturday 15<sup>th</sup> November 2025**, to allow the school to operate the Fair Banding process in accordance with its Admissions Policy. Further information will be emailed to applicants regarding test times. If an applicant does not sit the Common Ability Test their application will be considered after those that have sat the test. Further information will be emailed to applicants regarding the test times.

**APPLICATIONS SHOULD BE MADE ONLINE, HOWEVER, IF YOU WISH TO SUBMIT A PAPER APPLICATION TO THE SCHOOL PLEASE DO NOT PRINT AND USE THIS FORM, BUT REQUEST A COPY FROM THE ADMISSIONS OFFICER ON 01604 230240**

**Please note we cannot guarantee that we will be able to issue Common Ability Test times for applications received after the above deadline.**

Visit our web site at: [www.northampton-school.co.uk](http://www.northampton-school.co.uk)