

Supplementary Form for Pupil Premium Information
for Year 7 Entry September 2027



Please only complete this form if your child is deemed selective, according to the Bexley Test, and your child is currently eligible for Pupil Premium Funding. Completed Supplementary Forms should be returned to Bexley Grammar School by 31st October 2026.

Forename (s) of the child	
Surname of the child	
Permanent Home Address	
Child's Date of Birth	
Parent / Carer Name	
Parent / Carer Email Address	
Child's Primary School Name and Address	
Please confirm that you have provided a letter from your Local Authority or your child's primary school confirming that your child is eligible for Pupil Premium Funding.	

I understand that if I do not name Bexley Grammar School on the CAF (Common Application Form), this Supplementary Form will be invalid and will not register as an application.

I declare that the above information is correct and understand that any false information given may result in my child's place (if offered) being withdrawn.

SignatureDate:

Print name in full:

Relationship to child: