Form SA8

Request for in-year admission to school

Please read the “Applying for an in year school place in Westmorland & Furness” leaflet carefully before you complete this form. Please complete in block capitals.

All sections must be fully completed – any incomplete forms will be returned to the parent or carer

**Section 1 - child’s details**

|  |  |  |
| --- | --- | --- |
| Child’s first name  |       Child’s Surname       |  |
|  |  |  |
| Date of birth |  |  |  |  |  |  |  |  |  | Gender (male/female) |       |  |
| Current Year Group |       |

|  |  |
| --- | --- |
|  | No [ ]  |

 |  |
| Is the child in their chronological year group?  | Yes [ ]  No [ ]  |  |
| Child’s home address |  |  |
|  |  |       |  | Postcode  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |
| Are there any other school age children living at the above address | Yes [ ]  | No [ ]  |  |
| If yes please provide name(s), date(s) of birth and current school(s): |  |  |
|  |       |  |
|  |       |  |
|  | If you want to apply for a place for this/these children, please complete a separate form. |  |
| **Is the child**: |  |
| in the care of a Local Authority / previously looked after by a local authority? | Yes [ ]  |  No [ ]  |  |
| If yes, please give further details.  |       |  |
| a Traveller child | Yes [ ]  | No [ ]  | a carer  | Yes [ ]  | No [ ]  |  |
| Forces family | Yes [ ]  | No [ ]  | Asylum seeker  | Yes [ ]  | No [ ]  |  |
| **Does the child have**: |
| An Education, Health and Care Plan (EHCP) or is currently undergoing a statutory assessment? | Yes [ ]  |  No [ ]  |  |
| A pastoral support plan at their current / most recent school? | Yes [ ]  |  No [ ]  |  |
|  |
| **Has the child**: |  |
| Ever been permanently excluded from school | Yes [ ]  | No [ ]  |  |
| Has the child attended a pupil referral unit (PRU) during the last 12 months? | Yes [ ]  | No [ ]  |  |
| Are there any other specialist services involved e.g., social worker / youth offending worker? | Yes [ ]  | No [ ]  |  |
| If yes, please give name details  |       |  |
|  |
| **Current or last school / home education****(name & address)** |       |  |
|  |       |  |
| Is the child still attending the above school? | Yes [ ]  | No [ ]  | If no, what was the last date s/he attended? |       |  |
| How long has the child attended their current school? |       |  |
| If less than 12 months, please give details of the previous school |       |  |
| 4 |

|  |  |
| --- | --- |
| Name of school to which you are seeking admission (in order of preference) |  |
| 1 |       |  |
| 2 |       |  |
| 3 |       |  |
| Date place required from |       |  |
| Are you applying for any of these schools on the basis of faith? | Yes [ ]  | No [ ]  |  |
| If yes, which faith? |       |  |
| If it is not possible to offer your preferred schools would you consider admission to a Catholic school? | Yes [ ]  | No [ ]  |  |
| Why is a change of school being sought? Please give details. If your request is due to a change of address, please tell us the old and new address (continue on a separate sheet if necessary) |
|       |

**Section 2- Parent/carer details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full name of parent/carer |       | Title (Mr/Mrs/Ms/Miss etc) |       |  |
| Relationship to child |       |  |
| Contact tel number |       |  |
| Contact email address |       |  |
| Address if different from child’s  |       |  |
| I give consent for all correspondence to be sent to this email address | Yes [ ]  | No [ ]  |  |
| Are all parties with parental responsibility aware of, and in agreement Yes [ ]  No [ ] with this application? I confirm that I have parental responsibility for this child and the information given is correct. I understand that any place offered on the basis of fraudulent or intentionally misleading information may be withdrawn. I consent to the information on this form being shared with appropriate agencies and understand that contact may be made with the child’s current/previous school for information which may include attendance and exclusion data.If you are caring for someone else’s child for more than 28 days and you are not an immediate relative, you may be Private Fostering and it is a legal requirement that you inform the Local Authority.  If you think you may be Private Fostering, please tick this box [ ]  Further information is available by contacting 0333 240 1727 or on your Local Authorities website |
| Signed |  |  |
| Date  |  |  |
|  |

|  |
| --- |
| Please return your completed form to school.admissions@westmorlandandfurness.gov.ukor by post to: School Admissions, Westmorland & Furness Council, PO Box 304, Kendal, LA9 9GY |
| For further information please contact school.admissions@westmorlandandfurness.gov.uk, or telephone 0300 303 8144 |

|  |
| --- |
| **For School Admissions and Appeals use only:****Date received:** |