

Primary In Year Transfer Application Form



You must read the Primary In Year Transfer - Information Booklet for Parents before applying.

Section 7 of this form **must be** completed by your child's current/last school before submitting, unless you are relocating from overseas.

Incomplete application forms will not be processed.

Section 1 - Child's details

For Office Use Only: NCY

Surname:

First name:

Child's date of birth:

Child's gender:

Male

Female

Child's current address:

Postcode:

How long has the child lived at this address?

Years

Months

Does the child have a statement of special educational needs/Education, Health & Care Plan?

Yes

No

Is the child in care?

Yes

No

If yes, to which Local Authority?

Has the child formerly been in care?

Yes

No

If yes, you will need to provide a copy of one of the following, to be considered under this criteria

Adoption Certificate

Special Guardianship Order

Child Arrangement Order

Is the child a Refugee/Asylum Seeker?

Yes

No

If yes please give NASS number

Is the child a carer?

Yes

No

Is the child known to the criminal justice system?

Yes

No

Section 2 - Reasons for your application

Relocation from overseas*

Yes

No

Where from?

What is your nationality?

House move into or within Warrington*

Yes

No

If you are moving to (or within) Warrington please insert the address details of where you are moving to:

Postcode:

Date of move:

Bullying / unhappy**

Yes

No

Have you discussed your reasons for moving schools with your child

Yes

No

* If you are moving into or within Warrington you should provide proof of your new address. Acceptable proof would be a tenancy agreement (minimum of 6 months tenancy will be accepted), a copy of the exchange of contracts or a council tax/utility bill.

**If your reasons are due to bullying or that your child is unhappy at school, you are strongly advised to discuss your concerns with your child's current school. A school move may not necessarily resolve any problems relating to these issues

Section 3 – Current School Details

Name of current school:

Address if not a Warrington school:

Postcode:

Date Started :

Is the child still in attendance at the above school?

Yes

No

If no, please give last date attended

How many schools has your child attended in the last 12 months:

Name all previous schools attended – please put most recent school first

School:

Date From

Date To

Address:

Postcode:

Reason for leaving:

School:

Date From

Date To

Address:

Postcode:

Reason for leaving:

School:

Date From

Date To

Address:

Postcode:

Reason for leaving:

Section 4 – School Preferences Please state your preferences and provide reasons for applying i.e. sibling already attending, medical, ease of travel, distance, social or faith (please state name of sibling already in attendance at the school).

1.

Name and date of birth of sibling if applicable:

Reason:

2.

Name and date of birth of sibling if applicable:

Reason:

3.

Name and date of birth of sibling if applicable:

Reason:

Section 5 - Applications for faith schools only

If any of your stated preferences are for a faith school you may need to complete the school's supplementary form **as well as this form**, and return it to the school by the date they request.

Is your child Baptised Catholic Yes No Church of Baptism

Date Baptised Church Parish of residence

Is your child Baptised Christian Yes No Church of Baptism

Date Baptised Church Parish of residence

Is your child of another faith Yes No Please state

The school may carry out additional checks and proof of baptism or a letter from an appropriate minister of religion may be required.

Section 6 – Applicant Details

Mr/Mrs/Miss/Ms	First name:	Surname:			
Does the child live with you?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
If no, please give your address:					
Post code:					
Please state your relationship to the child?	Mum <input type="checkbox"/>	Dad <input type="checkbox"/>	Sibling <input type="checkbox"/>		
Grandparent <input type="checkbox"/>	Other (please specify)				
Do you have parental responsibility for the child?*	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Is the child privately fostered by you	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Is the child an exchange student	Yes <input type="checkbox"/>	No <input type="checkbox"/>

*For births registered in England and Wales, parental responsibility is automatically given to the child's mother from birth. A father will have child's parental responsibility if:

- He was married to the child's mother when the child was born (even if later divorced or separated)
- The child was born after 1 December 2003, and he is named on the birth certificate
- If a parental responsibility agreement is obtained from a court or by agreement with the mother

Parental Declaration

I can confirm that all of the information I have given on this form is correct and up to date and understand that if I have deliberately given false information, the offer of a school place may be withdrawn.

I understand that you will share the information with the schools on this form and, if different, the allocated school.

I understand that Section 7 of the form must be completed by my child's current school before submitting.

I have enclosed proof of address (if required).

Signature:

Date:

Home telephone number:

Mobile:

Email:

The Completed application form should be returned to :

The School Admissions Team, Families and Wellbeing Directorate, New Town House, Buttermarket Street, Warrington. WA1 2NH.

Or alternatively you can scan a copy of the form to schooladmissions@warrington.gov.uk

Transport to school

Please do not confuse the right to express a preference for a school with an entitlement to travel assistance. Please note that if your application is successful there will be no assistance with transport unless your child qualifies under the terms of the School and College Transport Policy.

Section 7 – This section must be completed by the child’s current or last school attended unless you are relocating from overseas.

Notification of Request for an In Year Transfer

This section **must be** completed by the designated In-Year Admissions Lead (IAL) at the child’s current school.

This section is used to help assess whether the child’s application is processed through the Fair Access Protocol. Please provide as much detail as possible, bearing in mind what information you would wish to know if the situation were reversed and the application was for your school.

Please be aware that applications will not be processed without a completed Section 7 and incomplete application forms will be returned.

Form completed by:

Has a discussion taken place with parent/carer to ensure that you have exhausted all possibilities of the child remaining at your school?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the possibility of a managed transfer been discussed with parents and preferred schools?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name:	Position:
Tel Number:	Email address:
Signature:	Date:

Section 7 (to be completed by current or last school attended)

Child's first name:

Child's surname:

Date of birth:

NCY:

Current School:

Date last attended:

Is/does the child (Please complete in full)

Child in Care or Formerly in Care	Yes <input type="checkbox"/>	No <input type="checkbox"/>	An EHCP	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Refugee or Asylum Seeker	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Current K or medical support but without an EHCP	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Carer	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Pupil Premium	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Service family	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Known to the Criminal Justice System	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Gypsy, Roma or Traveller family	Yes <input type="checkbox"/>	No <input type="checkbox"/>	CAF	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Outside Agency involvement: Please give details of any outside agency who are **currently** involved with this child. (Do not include any historical involvement)

Agency	Contact name	Contact Tel Number
CAMHS		
Child Protection/Safeguarding		
Social Services/Family Support		
Educational Psychologist		
Other agencies, please state		

Attendance

This academic year % overall attendance % unauthorised attendance

Last academic year % overall attendance % unauthorised attendance

Has your Attendance Officer been involved? Yes No

Behaviour support and exclusions

Permanently excluded? Yes No

Has the child had a period of exclusion in the last 12 months? Yes No

Has the child accessed support from alternative provision? Yes No

Has Behavioural Support been required? Yes No

Assessments Please provide the most up to date assessments for the child.

Please use a separate sheet if you wish to provide any additional information.