

Not moving but wanting a new school

Application form for in-year admissions

For more information and guidance on completing this form, see www.stockton.gov.uk/schooladmissions Please use black ink and write in block capitals. Do you require the school place immediately? /........... (day/month/year) *If no, when would you like the child to start? Please note you should not apply more than 4 weeks in advance as we cannot 'hold' school places (see exceptions for service families). Children are expected to take up the school place within 10 school days. If you are arriving from overseas please read the guidance about required documentation. Child's details (Please complete a separate application form for each child and send all applications together). Legal surname First name First name Date of birth / (day/month/year) Gender Bov Current address Postcode /........... (day/month/year) Date of move: If you are moving house: New addressPostcode Additionally if you are moving to the UK, we will need to see proof of your child's arrival in the UK, such as a copy of your child's boarding pass, travel ticket, endorsed passport or entry visa as well as the above. Yes* Is your child in Local Authority Care (looked after)? No *If yes, which local authority looks after your child? Please attach a supporting letter from your child's named Social Worker or advisory teacher Was your child previously looked after and then became subject to subject an adoption, child arrangement or special guardianship order? *If yes, please provide proof of the relevant order. Does your child have an Education. Health and Care Plan? Yes* *If yes, please do not complete this form and contact your child's special educational needs case officer for help to apply for a school place. Are you currently a Crown Servant or in Her Majesty's Armed Forces? *If yes, please provide an official letter confirming your relocation date and unit postal address and we will process your child's application in advance of arrival. Details about your child's schooling What is the reason for your application - please tick Moving into the Stockton-on-Tees Borough area Moving to another area within the borough of Stockton-on-Tees

	school?	Yes*	No	
Name of current / previous school				
Last date on school roll	/ (day/month/year)			
Have you withdrawn your child fro	Yes*	No 🗌		
*If yes, please tick the box below r	nost relevant to your circumstances			
At risk of being excluded	Elective home education	House move	Other	
Please provide more details about the reason for your child leaving h	your reason for applying for a change of sc is or her previous school?	hool, or if your child is no	ot currently in school,	
	vith any other external agency (such as	Yes*	No	
·	hologist, Family Support Worker or other)?			
It yes, please give details				
School proforonces				
School preferences				
Dl : - + +	-			
·	5.			
Preference 1	Preference 2	Preference 3		
Please list three preferred schools Preference 1 School:		Preference 3 School:		
*Please note that you must If applying for faith reasons, send a the LA. If applying on medical grou for the school will assess this to de	Preference 2 School: provide supporting evidence if you are applying any proof of your child's faith (as stated in the sconds, please attach supporting evidence from a locide whether to uphold the reason. Please read	School: g on faith grounds or on methool's admission policy) di healthcare professional. TI I the school's admission po	rectly to the school not ne admission authority licy before you apply to	
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an Education, Health and	ial educational needs (but value) I Care Plan)? Iescription of the child's ne		Yes* ppropriate professio		No
Does the child have a dis impacted on their attend	ability or medical condition ance or participation at sch	which has	Yes*		No 🗌
Is the child subject to a c	hild protection plan or a ch	ild in need plar	n? Yes*	k	No 🗌
•	ithority?	•			
	n Year 10 or 11 (or in Year 9 g and exam boards. If they				
Applicant deta	ils. Please ente	r your de	etails		
Title (for example, Mr, M	rs, Miss, Dr)				
Surname		First na	me		
Current address (if differ	ent from child)				
		Postcod	le		
Home phone		Mobile _I	ohone		
What is your relationship	to the child? (for example,	, mother)			
Do you have parental res	ponsibility for this child?		Yes		No
-	tal responsibility for the chouse and the child named in the	•	, ,	ormation belo	w if the other adult
Name	Address		Phone number		Relationship to child
named unless you provid	a legal obligation to contact de a copy of a Court Order of shared e.g. fleeing domesti	or other legal d			
To be complete	ed by the child's	current	or previous	school	
•	n to process the child's appl		-		rriving from overseas or
Child's Details					
Child's name	Date of Birth	Year Group	Current year's	Any fived +	erm exclusions in the
Office S fidifie	Date of Diftil	rear Oroup	attendance	past 12 mg	
School					

	Attair	nment		
Key	Stage 1	Key Stage 2		
Maths		Maths		
Reading		Reading		
Writing		Writing		
	Attainment	Key Stage 4		
Subject	Accuminent	Examination Board		
Jubject		Examination Board		
Has the child an Education, Ho or in receipt of SEN School Su		Yes	No	
*If the child is on the SEN Reg	ister, what are the main present	ing needs?		
Has an Early Help Assessmen	t been completed for the child?	Yes*	No 🗌	
*If yes, please state the refere	nce number (if known) and the d	ate the assessment was comp	leted.	
		Date	/	
Are any other agencies involve	ed with the child, if so which and	why?		
, -	5			
Any further information which	may be useful when trying to pla staff and other pupils, family bad			
	<u> </u>			
	ad of Year)			
	Head of Year)			
Date//	(day/month/year)			
Parental declarat	tion			
	esponsibility for this child and/or			
 I confirm that the informat guidance. 	ion on this form is correct and up	o to date, and that I have read a	nd understand the admissions	
	must be able to take up the alloc cepted within ten school days.	ated school place within ten so	chool days and that the place	
 All supporting information delay the application being 	relating to the application is enc processed.	losed. I understand if informat	ion is not provided this may	
Parent or carer signature				
a. a		– –		

Please return to: School Admissions and Transfers Team, Stockton-on-Tees Borough Council, Municipal Buildings, Church Road, Stockton-on-Tees TS18 1XE