

School applying for :



# APPLICATION FOR A SCHOOL PLACE DURING THE ACADEMIC YEAR 2022/2023

#### PLEASE READ THESE NOTES BEFORE COMPLETING THIS FORM

This form should be used by parents/carers requesting transfers between schools during the school year. You must complete a separate application for each school and each child.

All relevant sections of the form **must** be completed as fully as possible or the form will be returned to you.

Applications will be processed in strict date order and a decision will be notified in writing to the applicant.

This form can be made available in Braille or large type upon request.

Part 1 – Reason for you 1. Moving into Somerset 2. Moving within Somerse 4. Not moving but wanting 5. Moving out of Somerse	et g to change school	Please tick the relevant box  Proof of address such as exchange of contract letter from a solicitor or a 6 month tenancy agreement signed by yourself and landlord may be required. Not sending this information may result in an unnecessary delay in your child being offered a school place.					
Part 2 - Pupil Details							
Child's Legal Surna	ime:	Child's Forena	me(s):				
Date of Birth:		Male / Female	(please ci	rcle)			
Current Address:		(If applicable)Address moving to:					
Postcode:	Date since	Postcode:		Date if moving:			
Current/Previous School:				ous school, last date on			
Address:			roll:				
you complete application	— ible to provide a place at yo	·		vance of your preferred			
				What is your preferred start date?:			

Have you previously applied for a place at this school?

Date of Birth:

School child attends:

Please note: Local Authority schools will not consider more than one application for the same school within the same academic year unless there has been a significant material change.

Part 4 – Supporting Information

Your answers to the following questions are very important and the Admissions Authority will use this information in conjunction with the appropriate published over-subscription criteria to help determine whether your child has a priority for a place at one of your preferred school.

whether your child has a priority for a place at on 1.	e of your preferred school.	
Has your child previously been in care and is now	v formally adopted?	YES / NO (please circle)
Is this application for a child currently in the care	of a Local Authority?	YES / NO (please circle)
If Yes, which Local Authority?:		
Name of Social Worker:		
Contact Number:		
2.		
Does your child have an Education Health Care February Educational Needs (SEN)?  If YES please speak to the SEN Casework Team  If your child does have an Education Health C	by contacting 0300 1232224	YES / NO (please circle)
Special Educational Needs you do not need to		
If <b>NO</b> , do you believe there are important medical or s should be allocated at one of your preferred schools (but the Admission s Authority may need to consider the published over-subscription criteria)	This does not guarantee a place	),
Does your child have any specific disability of wh If YES, please supply any relevant information.	ich a school should be aware	e? YES / NO (please circle)
3.		
Does your child hold EEA (European Economic A	,	YES / NO (please circle
ii you nave indicated NO, piease attach a copy o	Ji your crilla's immigration do	cuments.
4. Will there be <u>any</u> siblings on roll at your preferr sibling(s) must be resident at the same address.	ed schools at the time the sc	:hool place is required? The
If <b>YES</b> please provide details of each sibling(s): Child's Legal Surname:	Child's Forename(s	e). 
Date of Birth:		,
Date of Birtin.	Male / Female (ple	ase circle)
School child attends:	Child's current Year	
Child's Legal Surname:	Child's Forename(s	s):

Male / Female (please circle)

Child's current Year

5. Fair Access Criteria – please tick if any of the following applies to your child. (Please note that ticking one of the boxes below does not guarantee a place at your preferred school. It will enable the Fair Access Protocol to be invoked should you be unable to secure a school place under the normal in year admission process)

invoked should you be driable to secure a school place drider the normal in year admission process)	
a) Children from the criminal justice system or Pupil Referral Unit or alternative provision who need	
to be reintegrated into mainstream education	
b) Children who have been out of education for two months or more	
c) Children of Gypsies, Roma, Travellers, refugees and asylum seekers	
d) Children who are homeless	
e) Children / family working with Children's Social Care or Health professional	
f) Children who are carers	
g) Children with special educational need, disabilities or medical conditions (but without statement)	
h) Children known to the police or a number of other agencies	
i) Children who have to move school because of domestic violence (whether staying in a refuge of	
with friends/other relatives)	
j) Children in Year 6 and Year 10 pupils (from summer term)	
k) Children in Year 11	
I) Children of UK Service Personnel	
m) Any other children who arrive in Somerset outside the normal admissions round who have	
difficulty securing a place	
n) Children at risk of permanent exclusion from school	
o) Children whose behaviour is a cause for concern	
p) Children with poor attendance of 85% or less in the current or previous academic year	

$\boldsymbol{c}$	

Are either parents members of staff at the	a preferred school?	YES / NO	(please circle
i Are either parents members of stall at the	e preferred School?	TES/NU	(piease circie

## Part 5 - Applicant's Details

E-mail Address:	Do you have legal Parental Responsibility for this child? (please circle) YES / NO
Daytime Tel No:	Mobile Tel No:
	Postcode:
Address (if different from child's):	
A daluga og (if different framer albildle).	
Relationship to child:	
Parent/Carer's Surname:	Parent/Carer's Forename:
Title: Mr/Ms/Mrs/Miss/Other (please state)	

#### Part 6 - Declaration

I understand that applications must be made by the child's legal parent/carer and that by signing the declaration below I will be confirming my understanding of the information provided on this application form and that the information I have provided is correct. I accept that the Admission Authority reserves the right to withdraw school places which have been obtained by providing incorrect or misleading information.

I understand that it is the parent's responsibility to ensure that the Admission Authority receives the completed application form safely. I note that it is recommended to send my application form by Special Delivery post, or obtain a proof of posting certificate, or a receipt from a County Hall Reception desk if my application is hand delivered. Furthermore, I understand that if my preferred schools include a school in another Local Authority (LA) area, that authority's timescale for providing a decision may be different.

I accept that where parents equally share parental responsibility and two applications are submitted for the same child, the Admission Authority will require the parents to agree which application is to be considered and which should

be withdrawn. If parents cannot agree and there is no court order to determine majority responsibility, the preferences indicated by the parent who receives child benefit for the child concerned will be awarded a higher priority than those from the other parent.

I accept that the child's home address must be the place where the child permanently resides for the majority of the time. This would normally be at the same address as the person who has Parental Responsibility for the child and is their main carer. Where the child spends equal amounts of time with both carers, the Admissions Authority will consider the place of residence of the parent/carer who receives Child Benefit to be the child's home. Evidence of parental responsibility will be required should there be doubt and the Admissions Authority may undertake thorough residency checks and reserves the right to request independent confirmation of the child's address.

#### Notification regarding the processing of any personal data supplied in this form

Data Controller: Somerset County Council

**DPO contact –** informationgovernance@somerset.gov.uk

**Purpose for processing:** The information that you give on this form will be used by the Council for the purpose of processing your application for a school place for your child.

**Legal basis for processing:** For sections 1 to 7: **By law:** The School Admissions Code 2014 which is statutory guidance for Local Authorities states that Local Authorities must provide a common application form that enables parents to express their preference for a place at any state funded school and Schedule 5 of the Deed of Development Consent Obligations relating to Hinkley Point C, Somerset. **Legitimate Interests:** For the prevention and detection of crime (Fraud Act 2006) and to help improve services. For section 8: Consent: we will only share your information with preferred schools if you indicate this, and you can withdraw your consent at any time.

**Data Sharing** – the personal data provided will be shared with early years settings, health authorities, schools, academies and free schools and may also be shared with other SCC service providers, the Department for Education, Somerset County Councils software supplier and School Appeal Panels. If you are applying for a school outside Somerset it may be shared with other Local Authorities and schools and academies in their area. Data may be shared by schools with a private admissions provider. If you indicate you are moving to work at the Hinkley Point site statistics will be shared with EDF Energy but no personal data will be shared. SCC will not disclose this information to any unauthorised person or body.

**Transfers abroad:** this data is held within the EU and is accessible by the approved application provider. **Data Retention:** The personal data supplied on this form will be retained for as long as is necessary to meet our statutory requirements and legitimate interests and it will be disposed of in a manner appropriate to its sensitivity. **Your Rights:** You have the right to ask Somerset County Council to a copy of your data, the right to rectify or erase your personal data, and the right to object to processing. However these rights are only applicable if the Council has no other legal obligation concerning that data. You also have the right to complain to the regulator, https://ico.org.uk/ **Consequences:** For sections 1 to 7: If you do not supply this information to us, we will not be able to process your application for a school place for your child.

For more information see www.somerset.gov.uk/privacy

Signature of Parent/Carer/ Guardian:	Date:	

#### Part 7 – Submitting your application form

When you are satisfied that you have provided all the relevant information on your application form and any necessary Supplementary Information Form(s) including proof of address, please ensure that you have signed the declaration in Part 6 and then submit your completed application to your preferred school.

## Sections 8 and 9

## IMPORTANT INFORMATION

The information requested in parts 8 and 9 **will not** be used to make the decision whether or not to offer your child a school place. This information is used solely for the purpose of identifying whether your child meets the criteria for consideration under Fair Access and to assist the new school with planning for your child's admission. You will be neither advantaged nor disadvantaged by completing these sections.

Moving school for whatever reason is a very important decision to make.

The Local Authority would strongly advise you to:

- 1. Discuss the move with your child's current school before taking the decision to transfer your child to another school.
- 2. Visit your all preferred schools before making an application

Part 8 to be completed by parent/carer
Part 9 to be completed by current or previous school

There is no statutory requirement to complete sections 8 and 9 however we would encourage you considering sharing information about your child.

By signing I understand that any information provided in sections 8 and 9 will be shared with the schools for which I have made a preference.

Please tick the box if you would like the Admission Authority to obtain the information contained in part 9 from your child's current or previous school on you behalf $\ \square$
Print name:

Signature of parent / Guardian:

Please send the completed sections 8 and 9 with your application form to your preferred school.

Not to be used to make a decision as to whether or not a place is offered. This information is to be used for the purposes of assisting the new school with planning for your child's admission.

# Part 8 – Additional Information

Reason for leaving Permanently excluded □	Fixed term	excluded □ Other □ (Please provide details)	
Why do you want your child to chusing a separate sheet if required		(Please give as much further information as you can	,
I have discussed my reasons for	wanting to cha	ange school with my child's current school.	
·		nave spoken to at your child's current school –	
Date of any meetings -			
Have any of the following services be	en involved with	your child in the last 3 years? YES / NO (please ci	rcle)
(Please tick all relevant boxes belo Parent Family Support Advisor (Pl	· —	Access Liaison Officer	
Medical tuition team		Educational Psychologist	
Children's Social Care		Child and Adolescent Mental Health Service	
Behaviour Support Worker		Physical Impairment Team	
Elective Home Education Team		Traveller Education Service	
Safeguarding Children Team		Speech, Language and Communication Team,	
Autism Team		Children's Autism Outreach Team	
Other – (Please specify)			
Is your child attending school regu If no is an Education Attendance (	•		
If your child is not attending regu	larly, please s	tate why.	

Not to be used to make a decision as to whether or not a place is offered. This information is to be used for the purposes of assisting the new school with planning for your child's admission.

### Part 9 - Information for your child's current or previous school to complete

# **In Year Admissions Additional Information**

Please ask an appropriate member of staff at your child's current school, for example the Headteacher or Head of Year to complete and sign this form. You must return this section with your application form.

Pupil's name					Da	Date of Birth						
Attendance %					Do	Period covered						
Attendance %						PE	ilou c	overed	<i>1</i>			
Special Needs												
School Action	Yes		No				hool Action Plus/pupil ecific funding			lic	Yes	No
Individual Education Plan or Pastoral Support Plan	Yes		No	No		Sta	Statement				Yes	No
Agencies involved –												
N.C. SATS Levels			Matl	hs			Е	nglish			Sci	ence
KS1												
KS2												
KS3												
CATS Score		Verbal			Non '	Verba	al	Qu	antitativ	'e		Mean
Options for Y10/11students												
Student Strengths/Interests/Achieve	ements											
Is the student - please indi												
Academically confidence			ES ES	<u>1</u> 1	2	3	4	5	No			
Stable peer relations Well motivated	snips		ES	1	2	3	4	5	No No			
Behaviour			S	1	2	3	4	5	No			
Medical history / concerns												
Other relevant information y Print name:	you wou	uld like to	o mal	ke th	e rece	eiving	scho	ol awa	re of:			

Signature:

Position in school: