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| **FOR OFFICE USE ONLY** | **DATE** |
| **Copy passed to**  **School Admissions** |  |



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| **Application for a Change of School (In-Year) 2020-2021**  *Please complete one application form per child. Failure to complete all sections of this form may delay your child’s application. Please use black ink and capitals* |

**To be completed by parent/Carer 1 Student information**

**Current Year Group:**

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| First name: | Family name: |
| Date of Birth: | Male/Female: |
| Address: | |
| Postcode: | Contact Telephone number: |
| Home Borough: | Home Telephone number: |
| Parent/carer’s Email: | |

**4. Children transferring from a school in the UK**

***If your child is not currently in school or is being home-schooled please state last UK school attended. This is required before the application can be processed.***

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| Name of Present School or last UK School attended: | School Address: |
| School Telephone Number: | Please give the name of the child’s Form Tutor or Head of Year at the school: |
| Has the transfer been discussed with the present school?  Yes / No | If not currently attending school please state reason and date of leaving last school: |
| Has your child every been excluded from school: |  |

**5. It is essential you tell us the reasons you want to transfer schools.**

**Please fill in the box below**

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*In Birmingham we operate a Fair Access Protocol. This Protocol exists to ensure that all schools admit their fair share of children with challenging behaviour. In order to assist the Admissions Authority in determining if your child should be considered for a place using this protocol please could you answer the following questions?*

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| **Has your child ever been excluded or had a managed move from any school? YES / NO** |
| **If yes, please give dates of fixed term and/or permanent exclusions and/or managed move:** |
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| **Are there any other agencies involved with your child? YES / NO** |
| **If yes, please provide details and any difficulties your child is experiencing:** |
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| **Please provide any other information that is relevant to this application here:** |
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To be completed by the parent/carer

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| **DECLARATION AND CONSENT TO SHARE INFORMATION** | | |
| **The information provided on this application form may be shared with other agencies and service providers to ensure that your child receives an appropriate service. The full Data Protection statement can be found in the parents’ information booklets online at** [**www.birmingham.gov.uk/schooladmissions**](http://www.birmingham.gov.uk/schooladmissions)  **If a parent/carer knowingly and willingly provides a false statement which would affect the success of this application they may have the school place withdrawn.**  I certify that the information I have provided is correct and that I am aware that giving false information may result in any offer of a school place being withdrawn.  I give my consent for the school admissions and pupil placements service to contact relevant agencies in order to validate this application. | | |
| **Title: e.g. Mr/Mrs/Ms/Miss:** | | |
| **Full Name (Please Print):** | | |
| **Email Address:** | | |
| **Home telephone number** | **Work telephone number** | **Mobile telephone number** |
| **Relationship to child:** Mother 🞎 Father 🞎 Family member (live in same household) 🞎  Step-parent 🞎 Relative 🞎 Social Worker 🞎 Foster Parent 🞎 Other (Please give details) 🞎 | | |
| **Signature of parent or carer:**  **Date:** | | |

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| **To be completed by Headteacher/Principal of your child’s current or most recent school (required when the student is moving from a UK maintained school). The application could be delayed if this section is incomplete.** |
| I confirm that the information provided by the applicant on this application is correct: 🞎 Yes 🞎 No (please tick) |
| **Name of person completing this declaration:** |
| **Position:** |
| **Signature:** |
| **Additional Needs (Behaviour, Learning, Access):** Please provide details, including any support school currently provides/adjustments that school has in place for the student (e.g. EHCP, IEP or PSP)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Attendance (%)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Authorised absence figure (%)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Unauthorised absence figure (%)\_\_\_\_\_\_\_\_\_\_\_\_**  **Is the student supported by other agencies?** (e.g. is there a current previous CAF, CAMH, or Social Work proffesional involvement etc.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Please provide any additional information here:** |

**IMPORTANT: Note to Parent/Carers*:***

***If your preferred school is unable to offer your child a place, please contact staff in School Admissions on 0121 303 1888 (Option 4) who will be pleased to offer advice and guidance on what to do next.***

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| **Please note you are required to submit proof of address e.g. Council Tax bill, proof of residency e.g. Electric bill (within the last 6 months) and proof of your child’s date of birth e.g. birth certificate or current passport with this application form**  **Incomplete forms will not be processed and will be returned** |

* **I certify that I am the person with parental responsibility for the child named on this form and that the information given is true to the best of my knowledge and belief.**
* **I understand that any false or deliberately misleading information given on this form and/or any supporting information may render this application invalid, or lead to the offer of a place being withdrawn.**

**7. Please sign this form**

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| Signed Parent/Carer: | Date: |