

DARLINGTON IN-YEAR ADMISSION APPLICATION FORM



- You should only fill in this form if you live in Darlington and you have parental responsibility for the child you are applying for a place for.
- Please use black ink and BLOCK CAPITALS and tick any boxes that apply.
- Please carefully read the attached guidance notes before filling in this form.
- You must fill in section A. Section B should be filled in by the child's previous school in the UK.
- Only one application per child should be made. Please return your completed application form to: **School Admissions Team, Darlington Borough Council, Town Hall, Darlington, DL1 5QT (01325) 405907 or 405909**

Section A – (To be filled in by you)

1. Reason for your application

Reason for your application (please tick as appropriate)	<input type="checkbox"/> A	Moving to or leaving Darlington from/to another area of the United Kingdom	<input type="checkbox"/>
	<input type="checkbox"/> B	Moving to Darlington from abroad	<input type="checkbox"/>
	<input type="checkbox"/> C	Moving to another area of Darlington	<input type="checkbox"/>
	<input type="checkbox"/> D	Wanting to transfer schools but not moving	<input type="checkbox"/>

2. Your child's details

Child's Forename	<input type="text"/>	Child's Middle Names	<input type="text"/>
Child's Legal Surname	<input type="text"/>	Chosen Surname	<input type="text"/>

Child's current address and postcode

We check addresses and you must expect that we will withdraw our offer of a school place if you give a false address

Postcode:

Child's Date of Birth	<input type="text"/>	Year Group	<input type="text"/>	Gender (Please tick as appropriate)	<input type="checkbox"/> Male	<input type="checkbox"/> Female
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Name and address of current school:	<input type="text"/>	Name and address of previous school:	<input type="text"/>
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Is your child still attending this school?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Does your child have a statement of special educational needs?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Has your child ever been permanently excluded from a school?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

3. Moving House

New address details:

We check addresses and you must expect that we will withdraw our offer of a school place if you give a false address

Postcode:

Date of Move:

4. School Preferences

Please indicate up to THREE schools which you would wish to apply in the order that you prefer them. Your application details will then be forwarded to the school(s) relevant Admission Authority:

Priority	School	Additional Information/Reasons for Transfer (Please give as much information as possible in support of your application. Please include any details of support your child receives due to special education needs.)
1		
2		
3		

If you have listed a Voluntary Aided (RC or CE) School in one of the spaces above, you must also complete Section 5 of this form.

5. Supplementary Information for Church Schools

Please complete this section if you are applying for a place at a voluntary aided church school (RC or CE):

Religion

(e.g. Roman Catholic, Church of England,
Other – please state)

Date of Baptism
(please attach certificate)

Parish of Baptism

6. Sibling Information (Brothers and Sisters)

Does your child have a sibling(s) living at the same address?

Yes

No

Name of Sibling	Date of birth	Name of school currently attending

Section 7 – If you have moved into the United Kingdom

When did your child arrive in the UK?	
Does your child speak English?	
Which Country was your child born in?	
First Language of your child	

Please attach photocopies of the following documents with your completed application form:

a) Your passport and your child's passport

b) If you are an asylum seeker or a refugee the home office document confirming your status

Section 8 – Applicant(s) Details

Applicant 1	Applicant 2
Title: Mr Mrs Miss Other	Title: Mr Mrs Miss Other
First Name(s):	First Name(s):
Surname:	Surname:
Address (if different to that of the child)	Address (if different to that of the child)
Daytime Tel No:	Daytime Tel No:
Mobile No:	Mobile No:
Home Tel No:	Home Tel No:
Relationship to child:	Relationship to child:

Where the application is not being made by all parent(s)/person(s) who have parental responsibility for the child please provide details of any other parent(s)/person(s) who have parental responsibility.

Title: Mr Mrs Miss Other	
First Name(s):	
Surname:	
Address (if different to that of the child)	
Mobile No:	Home Tel No:
Relationship to child:	
Have they been informed/consulted about this application?	

Correspondence may be shared with any other parent(s)/person(s) who have parental responsibility for the child unless the applicant states a reason for withholding information e.g. threat of domestic violence. Please state reason and provide any supporting documentation e.g. Court Order

A copy of the form was sent to the other parent(s)/person(s) with parental responsibility on and any confirmation of agreement to this application should be provided within 14 working days of this date. If not provided then the application will be processed without delay. If there is a known disagreement between the parent(s)/person(s) who hold parental responsibility the application will not be processed until the disagreement is resolved and confirmation of agreement is provided. e.g. an agreement signed by all parent(s)/person(s) in disagreement or a Court Order. **Admissions use only**

SECTION 9 – Declaration and signature of parent/carers

- I have read and understood the relevant admissions criteria and want to apply for a place at each of the schools named in section 4, and have listed the schools in my order of preference.
- I understand that any false or deliberately misleading information given on this form and/or supporting information may render this application invalid, or lead to the offer of a place being withdrawn.

Signature of Parent/Carer Date

We may pass the information you give on this form to schools inside or outside of Darlington or to other local education authorities as part of the admissions procedure. We will pass the information to the school the child is offered a place at, where it will form part of the pupil database that the school keeps. We will deal with any personal information you provide in line with the Data Protection Act 1998.

Admissions stamp only

Date received

Section B – (This should be filled in and signed by the Head of Year or Headteacher of your child’s present or previous school.)

If you are applying for a school place, the head teacher or head of year must complete this section before we can process your application. The form needs to be signed with the official school stamp.

Date request form was received		
Dates of attendance at this school	From:	To:
UPN Number		
Has the reasons for the request been discussed with the parent/carer?	Yes	No
Do you agree to the request to transfer to another school?	Yes	No

Attendance

Please tick one of the following: Good Average Poor Attendance %

If attendance was lower than 85%, please give the reason why.

Period covered: Was an attendance officer involved? Yes No

Special Needs

School action School Action + Statement IEP

Common assessment framework (CAF)

Has a CAF been carried out or is one being considered? Yes No

If yes, please attach a copy of the CAF. If you do not have a copy, please give the reason why.

Attainment (National Curriculum levels) (KS1, KS2 and KS3)

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Attainment (National Curriculum levels) KS4

Has this child been studying for GCSEs or other KS4 examinations? Yes No

Subject	Examination Board	Course Code	Date course began	Where was the course studied

Without this evidence, it will be difficult for a mainstream school to offer a place late in Year 10 or in Year 11.

Part B (continued)

Other agencies involved (Please tick) (Please attach reports or provide details on an extra sheet)

Educational Psychologist Service	<input type="checkbox"/>	Youth Offending Service	<input type="checkbox"/>
Pupil Referral Unit	<input type="checkbox"/>	Youth Service	<input type="checkbox"/>
Alternative Provision (Off-Site)	<input type="checkbox"/>	Social Worker	<input type="checkbox"/>
TAS Involvement	<input type="checkbox"/>	Child and Adolescent Mental Health Service	<input type="checkbox"/>
Local Authority Attendance Officer	<input type="checkbox"/>	Other (Please State)	<input type="text"/>

Please tick any of the following statements that apply to this application

<input type="checkbox"/> Child has been out of education for longer than one school term (based on a 3 term year)	<input type="checkbox"/> Application is for admission to Year 11 of a mainstream school
<input type="checkbox"/> Child who has English as an additional language	<input type="checkbox"/> Child who is a carer
<input type="checkbox"/> Traveller child	<input type="checkbox"/> Child from whom a managed move from one school to another is considered appropriate
<input type="checkbox"/> Child of refugees or asylum seekers	<input type="checkbox"/> Child has been involved with CAMHS
<input type="checkbox"/> Looked After Child	<input type="checkbox"/> Pupil Premium
<input type="checkbox"/> Service Family	<input type="checkbox"/> Currently in Resource Base

Other information which may be relevant to this application
(behavioural issues, if applicable, previous schools attended in the last two years)

Name	<input type="text"/>
Position held	<input type="text"/>
Signed	<input type="text"/>
Date	<input type="text"/>

School Stamp

