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**REDCAR AND CLEVELAND**

**MID-YEAR ADMISSION APPLICATION FORM**

* Parent / carer must fill in section A. Section B to be completed by the child’s previous school in the UK.
* Please complete a separate form for each child.
* The application should be made no more than four school weeks before the place is required.

Please return your completed application form to:   
**School Admissions Team, c/o Redcar and Cleveland House, Kirkleatham Street, Redcar, TS10 1RT.   
Tel: 01642 837740 / 837730 or Email:** [**schools\_admissions@redcar-cleveland.gov.uk**](mailto:schools_admissions@redcar-cleveland.gov.uk)

**Date received:**

**Admissions use only**

**Section A – (To be filled in by Parent. Carer)**

**1. Reason for your application**

|  |  |  |  |
| --- | --- | --- | --- |
| Reason for your application (please tick as appropriate) | A | Moving to Redcar and Cleveland from another area of the United Kingdom |  |
|  |  |  |
| B | Moving to Redcar and Cleveland from abroad |  |
|  |  |  |
| C | Moving to another area of Redcar and Cleveland |  |
|  |  |  |
| D | Wanting to transfer schools but not moving |  |

**2. Your child’s details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Child’s Forename** |  | **Child’s Middle Names** |  |
| **Child’s Legal Surname** |  | **Chosen Surname** |  |

|  |  |
| --- | --- |
| **Child’s current address and postcode** | **Postcode:** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Child’s Date of Birth** |  | **Year Group** |  |  | **Gender**  (Please tick as appropriate) | **Male** |  | **Female** |

|  |
| --- |
| **Name and address of current or previous school:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Is your child still attending this school?** | **Yes** |  | **No** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Has your child ever been permanently excluded from a school?** | **Yes** |  | **No** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Does your child have an Education Health and Care Plan?** | **Yes** |  | **No** |  |
|  |  |  |  |  |
| **Is the child subject to a private fostering arrangement?** | **Yes** |  | **No** |  |
|  |  |  |  |  |
| **Is your child ‘looked after’ by a Local Authority (i.e. in Care?)** | **Yes** |  | **No** |  |

**If yes, which authority \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Does your child have a Social Worker? If so, please provide contact details below:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- |
| **Was your child previously “Looked After”** by a Local Authority but ceased to be so because they were adopted or became subject to a Child Arrangement Order\* or Special Guardianship Order\*? | **Yes** |  | **No** |  |

**If yes, which authority \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\* We may be in contact to confirm this information**

**3. Moving House**

**If you are moving into the area from another local authority area please make an application   
 through your home local authority in the first instance.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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 wish to apply for in the order that you prefer them.

**Please note that if one of your school preferences is Rye Hills Academy, Redcar, you will need to contact the Academy directly for admission.**

|  |  |  |
| --- | --- | --- |
| **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** |  |  |

**5. Sibling Information (Brother, Sister, Step Brother, Step Sister, Adopted Siblings and   
 Foster 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** |
|  |  |  |
|  |  |  |
|  |  |  |

**6. 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 |  |

**7. Applicant(s) Details**

**Only 1 parent / carer is required to complete their details below.**

|  |
| --- |
| Parent / Carer |
| Title: Mr / Mrs / Miss / Other |
| First Name(s): |
| Surname: |
| Address (if different to that of the child) |
|  |
|  |
| Daytime Tel No: |
| Mobile No: |
| Home Tel No: |
| Email Address: |
| Relationship to child: |
| Do you have parental responsibility for the child? Yes No  **If NO please complete the section below.** |

**Where the application is not being made by a parent(s) / person(s) who has 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: | Relationship to child: | |
| Email Address: | | |
| 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.

**8. Declaration and Signature of Parent / Carer**

**Declaration:**

1. I certify that, to the best of my knowledge, the details I have provided are correct.  I understand that a place offered on the basis of inaccurate information may be withdrawn
2. I certify that I have full parental responsibility for this child.

**Please note that your transfer request will not be submitted to your requested school until this application form has been received by the School Admissions Team. Please be aware that an application can take up to 15 school days to process.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Parent / Guardian** |  | **Date** |  |

**The information provided on this form will be used for processing your application for admission to primary school in accordance with the Data Protection Act 1998.  Information will be shared with other local authorities under co-ordinated admission arrangements, where appropriate.**

**Section B – (Please ask the Head Teacher or Head of Year of your child’s present or previous school to complete the details below and sign the form.)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of child | | | | |  | | | | | |
| Name of school | | | | |  | | | | | |
| 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** | | | | | | | | | | |
|  | | | | | | | | | | |
| Attendance: please enter % | |  |  | | | | | | | |
|  | | | | | | | | | | |
| Please state reasons for any issues with attendance. | | | | | | | | | | |
|  | | | | | | | | | | |
| Period covered: |  | | | Was an attendance officer involved? Yes | | |  | No |  |  |
|  | | |  | | | | | | | |

**Special Needs**

|  |
| --- |
| SEN Support (K) Education, Health and Care Plan (E) |

|  |
| --- |
| **PRIMARY APPLICATIONS ONLY - Attainment (National Curriculum levels) (KS1 and KS2)** |
|  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PRIMARY APPLICATIONS ONLY - Has the child passed their Phonics Checklist Assessment in Y1 or Y2?** | | | | | | | | |
|  | | | | | | | |
| **SECONDARY APPLICATIONS ONLY – Attainment (National Curriculum levels) (KS3)** | | | | | | | | |
|  | | | | | | | |
| **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 | | | |
|  |  |  |  | |  | | | |
|  |  |  |  | |  | | | |
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Without this evidence it will be difficult for a mainstream school to offer a place late in Year 10 or in Year 11.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Exclusions (Exclusion History/Behaviour Log) – Please attach additional details if necessary** | | | | |
| Exclusion Type | Start Date | End Date | Duration | Reason |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

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| --- | --- | --- | --- | --- |
| **Please tick any of the following statements that apply to this application - Please attach reports or provide details on an extra sheet.** | | | | |
| Educational Psychologist Service |  | Youth Offending Service | |  |
|  |  |  | |  |
| Pupil Referral Unit |  | Youth Service | |  |
|  |  |  | |  |
| Alternative Provision (Off-Site) |  | Social Worker | |  |
|  |  |  | |  |
| TAS Involvement |  | Child and Adolescent Mental Health Service | |  |
|  |  |  | |  |
| Local Authority Attendance Officer |  | Other  (Please State) |  | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Child has been out of education for longer than one school term (based on a 3 term year) |  | Application is for admission to Year 11 of a mainstream school |
|  |  |  |  |
|  | Child who has English as an additional language |  | Child who is a carer |
|  |  |  |  |
|  | Traveller child |  | Child from whom a managed move from one school to another is considered appropriate |
|  |  |  |  |
|  | Child of refugees or asylum seekers |  | Child has been involved with CAMHS |
|  |  |  |  |
|  | Looked After Child |  | Pupil Premium |
|  |  |  |  |
|  | Service Family |  | 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)**

|  |
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|  |

**School Stamp**

|  |  |
| --- | --- |
| **Name** |  |
|  |  |
| **Position held** |  |
|  |  |
| **Signed** |  |
|  |  |
| **Date** |  |