Form SA8

of the previous school

Request for in-year admission to school

Please read the "Applying for an in year school place in

Westmorland & Furness" leaflet carefully before you complete this form. Please complete in block capitals.

ALL SECTIONS MUST BE FULLY COMPLETED - ANY INCOMPLETE FORMS WILL BE RETURNED TO THE PARENT OR CARER

Westmorland

Section 1 - child's details Child's first name Child's surname Gender Date of birth (male/female) Child's home address Postcode Are there any other school age children living at the above address Yes \square No \square If yes please provide name(s), date(s) of birth and current school(s): If you want to apply for a place for this/these children, please complete a separate form. Is the child: in the care of a Local Authority / previously looked after by a local authority? Yes 🗌 No \square If yes, please give further details. No \square Yes 🗌 No □ a Traveller child Yes \square a carer No \square No 🗌 Forces family Yes 🗌 Asylum seeker Yes Does the child have: An Education, Health and Care Plan (EHCP) or is currently undergoing a statutory Yes 🗌 No 🗌 assessment? Yes \square No \square A pastoral support plan at their current / most recent school? Has the child: Ever been permanently excluded from school Yes 🗌 No 🗌 Yes 🗌 No \square Has the child attended a pupil referral unit (PRU) during the last 12 months? Are there any other specialist services involved e.g., social worker / youth offending Yes 🗌 No \square worker? If yes, please give name details Current or last school / home education (name & address) If no, what was the last Yes \square No \square Is the child still attending the above school? date s/he attended? How long has the child attended their current school? If less than 12 months, please give details

Name of school to which you are seeking admission (in order of preference)				
1				
2				
3				
Date place required from				
Are you applying for any of these schools on the basis of faith?		Yes 🗌	No 🗌	
If yes, which faith?			 	
If it is not possible to offer your preferred schools would you consider admission to a Catholic school?		Yes 🗌	No 🗌	
Why is a change of school being sought? Please give details. If your request is due to a change of address, please tell us the old and new address (continue on a separate sheet if necessary)				
Section 2- Parent/carer	details			
Full name of parent/carer	Title	Title (Mr/Mrs/Ms/Miss etc)		
Relationship to child				
Contact tel number				
Contact email address				
Address if different from child's				
I give consent for all corre	espondence to be sent to this email address	Yes 🗌	No 🗌	
I confirm that I have parental responsibility for this child and the information given is correct. I understand that any place offered on the basis of fraudulent or intentionally misleading information may be withdrawn. I consent to the information on this form being shared with appropriate agencies and understand that contact may be made with the child's current/previous school for information which may include attendance and exclusion data. If you are caring for someone else's child for more than 28 days and you are not an immediate relative, you may be Private				
Fostering and it is a legal re	equirement that you inform the Local Authority. If you are mot sequirement that you inform the Local Authority. If you are mation is available by contacting 0333 240 1727 or a	think you may b	e Private Fostering, please	
Date				
Please return your completed form to school.admissions@westmorlandandfurness.gov.uk or by post to: School Admissions, Westmorland & Furness Council, PO Box 304, Kendal, LA9 9GY				
For further information please contact school.admissions@westmorlandandfurness.gov.uk , or telephone 0300 303 8144				
For School Admissions at Date received:	nd Appeals use only:			