In Year Admission application form

Before you fill in this form, please read the guidance documents. Information about In Year Admissions and school directories are available on www.hertsdirect.org/admissions

For voluntary aided and foundation schools and academies

- You may have to complete a supplementary information form (SIF). The schools directory indicates whether a SIF if required
- SIFs are available from the school or at www.hertsdirect.org/admissions
- > SIFs and any additional supporting documentation should be returned to the relevant school.

If you are applying to a voluntary aided or foundation school or an academy outside Hertfordshire, please contact the relevant authority for advice.

Please fill in this form using black ink and CAPITAL LETTERS. You must include two forms of proof of address. One of which must be: council tax bill, utility bill, solicitor's letter showing completion date or a signed tenancy agreement. Please do not send originals.

Section 1: Reason for your application

1. Moving into Hertfordshire

2. Moving out of Hertfordshire

3. Moving to another area within Hertfordshire

4. Not moving but wanting a new school

Section 2: Your child's details

Date place is required:

Your child's full name		First name					Middle name(s)			
		Fam	ily name							
Date of Birth	Day		Month	Year				Female	Male]
Your child's current address and postcode		House number			House n	ame	e			
We check addresses and you must expect that we will withdraw our offer of a school place if you give a		Street								
		Том	vn or Villa	ge						
false address	са	County Poste			Postcode				give this so our application	

Does your child have a statement of special educational need? Yes \Box

Is your child in public care?	Yes 🗆	If yes, which local authority	
(Please include a supporting I	etter from	your child's social worker and/or adviso	ry teacher)

Is a parent working as a UK service personnel or other Crown Servant (including Diplomats)?

Yes 🗆 (please include an official MOD, FC or GCHQ letter showing relocation date)

Office use only			
	POA 🗆	part A 🗌	Letter

Please tick relevant box

- ☐ You must fill in Part A
- □ You must fill in Part A
- You must fill in Part A
- □ You must fill in Part A

Section 3: Moving House

Fill in this section if you are moving house – you must send a solicitor's letter confirming completion date or a copy of a signed tenancy agreement. We will not use your new address until your child is resident at that address.

When are you moving?	Day		Month	Year	
What will your new address be?	House number		House na	me	
We check addresses and you must expect that we	Street				
will withdraw our offer of a	Town or Village				
school place if you give a false address	County	Postcode			give this so we can

assess your application correctly.

Section 4: Schools

In the boxes below, please write the names of the three schools you would like your child to go to. Put the school you would most prefer first in your list. You will find the school code in the entry for each school in the directory section.

Preference 1	

School Code (Hertfordshire LA Code 919)

Preference 2	

Schoo	ol Code	(Hertfo	rashire	LA COO	de 919)	
	1				1	
Prefe	erence	2 3				

School Code (Hertfordshire LA Code 919)

Social/Medical

Are you applying under Rule 2 (medical/social) for a **community or voluntary controlled** school only? If you are, you must include professional evidence in support of your application.

Yes		If yes, please state for which school
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For voluntary aided, foundation or academy schools, please refer to the published admission arrangements and submit supporting evidence to the school direct.

	If you have listed Tring School as one of your preference schools, are there any specific religious reasons why Tring School is particularly suitable to meet the needs of your child?						
9			,	5 ·····			
Yes		No		(If yes, applications must be supported by a letter from a Priest or Minister.)			

Sibling Information – (Brothers and Sisters)

Does your child have a brother or sister at any of the schools you are applying for? Please refer to page 7 of the In Year guidance notes.

Brother or sister's		First name			Family name			
details:		School attending	g					
Date of Birth	Day	Month	Year			Female	Male	
Brother or sister's add and postcode	ress	House number			House name			
		Street						
		Town or Village						
		County		Postcode			give this so our applicatio	
Section 5: Your ch		current (or	last) :	school	(NB We	will conta	ct this sch	ool)
Name of Headteacher								
Name of School								
Street								
Town/Village								
County		Posto	ode					

County	Postcode	
Telephone number of school	Year Group	Date of last attendance, if not still attending

Section 6: Parent/Carer contact details

Title and surname	Mr	Mrs	Miss	Other	Initial	Famil	y Name
Your current address and postcode (if different from your child's	Hous	se numb	er		House n	ame	
address)	Towr	n or Villa	<u> </u>				
	Cour	ity	P	ostcode			nust give this so we can ss your application correctly.
Telephone numbers	Hom	е					
(including code)	Mobi	le					
	Moth	er				Father	
Relationship to child	pleas			ital respon of parental	sibility	Please state	relationship to child:

Are you happy to be contacted by email? Yes Email address: _ If you tick yes, we may use your email address for future communication

Section 7: Additional Information

Why do you want your child to move school? (<i>F</i> support your request using a separate sheet if necess more information.)	ary. Please see pa	ge 7 of the guidance docum	nent for
I have discussed my reasons for wanting to mo	ove my child to a	different school with my	child's
current school? Yes □	–	-	
I have included Form A completed by the scho	ol Yes 🗆]	
Has your child attended any other Hertfordshire If yes, please give details	e School? Yes	□ No □	
Name of school	Date of leaving		
Reason for leaving: Permanently excluded Moved home Other (please give details)	Child not settl	ed 🗆	
			1
Have any of the following services been inv your child in the last 3 years?	olved with	Yes 🗆 No 🗆	
Attendance and Pupil Support Officer	Education Supp	oort Centre	
Integration Team	Education Supp for Medical Abs		
	0		
Educational Psychologist	Social Worker		
Educational Psychologist	Other)	
	Other) Yes □ No □	
Child and Adolescent Mental Health Service	Other (Please specify		
Child and Adolescent Mental Health Service Is your child attending school regularly?	Other (Please specify		
Child and Adolescent Mental Health Service Is your child attending school regularly?	Other (Please specify		

This part of the application **must** be completed by your child's current school.

IN-YEAR ADMISSIONS ADDITIONAL INFORMATION - PART A

Please ask an appropriate member of staff from your child's current school, for example Head of Year /Class teacher to complete and sign this form and return it with the application form.

Personal Details				
Surname		Current school		
First names		Date of Birth		

Attendance			
Attendance (%)		Period covered	
Punctuality	Good/average/poor	EWO involved?	Yes/No

Special Needs			
School Action/ School action +	Yes/No	IEP	Yes/No
Statement	Yes/No	EPF	Yes/No

Attainment (National Curriculum Levels)				
Subject	Level	Date	Other (eg CAT scores)	
Maths				
English				
Science				

Other agencies involved (please tick)			
(please attach reports and/or provide details on an additional sheet)			
Educational Psychologist Service		Social Worker	
Behaviour Support Team / Education Support Centre		Child and Family Clinic	
Home Hospital Education		Refugee & Traveller Team	
Minority Ethnic Curriculum Support Service		Looked After Team	

Other Support Mechanisms	
Pastoral Support Plan (Dates and	
comments)	
Fixed term exclusions	

Other	

To be completed by your child's current school.

Please add any other comments you think we may find helpful to enable a successful transition into a new school:

To help this child's future school easily discuss the above, please give full contact details below. Thank you for your help in completing this form			
Name		Tel number	
		(incl. extension)	
Email			
Signatu	re of	Date:	
School	representative:		

Section 8: Does the child have a right to be educated in the UK as a British or EEA

citizen?

Yes 🗌 No 🗌

If the answer to the above question is "no", please provide relevant evidence in the form of:

- the relevant section of your child's passport which shows citizenship, and
- visa status

Section 9: De	claration	
lf you delibera	tely give false information, we may withdraw our offer of a school place.	
inform my ch this application and, if differe take up the al	rmation I have given on this form is correct. I understand that you vild's current school of this application and will share the information on with the schools (and their maintaining authorities) listed on this nt, the allocated school. I understand that my child must be in a polocated school place immediately and that the place may be withdred within 10 school days.	on in s form sition to
l confirm l hav	e parental responsibility for this child	
I enclose:	Supporting evidence relating to question 4	П
	Reasons to support my application (if applicable)	
	Proof of address x 2 (please do not send originals)	
	Part A completed by my child's current school	
Your signature Your full name]
Date		-

Please return this application form to the In Year Admissions team at the address below. If you have any queries, please contact the Customer Service Centre on 0300 123 4043.

In Year Admissions Team

County Hall CHR 102 Pegs Lane Hertford SG13 8DQ