Office use only		Faulas Ct Datawa
Child's surname:	Year Group:	Earley St Peter's CE Primary School
Date of Admittance:		,

APPLICATION FOR IN-YEAR ADMISSION TO EARLEY ST PETER'S CHURCH OF ENGLAND PRIMARY SCHOOL

All sections of this application form must be completed where applicable. Reference should be made to the school's admissions policy to understand the basis on which your application will be considered by the school. Your completed application form must be returned to the school. Please use **CAPITAL** letters.

If you wish to apply for any other school in the Wokingham borough, you may apply to the Wokingham Borough Council by completing the form available at: www.wokingham.gov.uk/schools/inyear/. The guide is available on the in-year page at www.wokingham.gov.uk/admissions.

SECTION 1 – APPLICATION INFORMATION

Date from which admission is required	Day	Month	Year
Reason for your application (please tick as appropriate)	the United King B Moving to the \(\) area (applicable) C Moving to the \(\) D Moving to anot	Wokingham Borough front John Wokingham Borough do to Crown Servants ar Wokingham Borough front her area of the Woking Insfer schools but not m	ue a posting to the and Service personnel) om abroad ham Borough
SECTION 2 – YOUR CHILD'	S DETAILS		
Child's full name	Legal Surname:		
	First name:		
	Middle name(s):		
	Preferred Surname if different from above:		
Please circle:	Date of Birth:		
Male Female	Day	Month	Year

SECTION 3 – YOUR DETAILS Name and contact details of Full name: parent Title: Relationship to child: Yes Do you have parental responsibility? No you are caring for If no, please provide details. someone else's child for more than 28 days and you not an immediate Home telephone: Mobile: are relative; you may be private fostering and it is a legal responsibility to contact the Email: local authority on 0118 974 6243 or see council website Current address: House number: House name: Street: Town/Village: Post code: County: Is this the child's address: Yes No Current address of child if House number: House name: different to parent Street: Town/Village: County: Post code: Address of proposed new Anticipated date of move: address, if moving House number: House name: Street: Evidence of move will be required. Town/Village: Post code: County: Please advise if there are any changes to these plans as this may affect the New home telephone number:

with your application when it is available).

Yes

Have you exchanged contracts or completed, or are you in receipt of a signed rental agreement for this property? (Please submit this information

No

allocation of a school place.

SECTION 4 – CURRENT OR	LAST SCHOOL		
Child's current or last school	Name of school: Address:		
Continue reasons for leaving on additional sheet of paper if there is insufficient space	School telephone number: Date of last attendance, if not currently attending: Year group: Does your child have any fixed or permanent exclusions? If yes, please provide details below. Yes No Reason for leaving or reason for request to change school:		
Please note that the trust may seek further information from your child's current school to verify information provided on this application form or to determine whether the Fair Access Protocol should be considered for your child's application.	Have you discussed the proposed change of schools with your child's current school? Yes No Is there any additional information which you consider is relevant to this application? In particular whether you consider the application should receive consideration under Wokingham Borough Council's Fair Access Protocol (available on the in-year page at: www.wokingham.gov.uk/admissions) Yes No		
SECTION 5 – SCHOOL PREFERENCE			
You are applying for Earley S give your reasons for your pre	St Peter's Church of England Primary School and this is your opportunity to eference.		
Reasons for choice:			

SECTION 6 – ADDITIONAL INFORMATION A Does your child have an Education, Health and Care Plan (EHCP)? Yes No B Is the child looked after or previously looked after by a local authority? Yes No Relevant supporting information will be required e.g. letter from social worker. Name of local authority: C Are you applying on denominational grounds? No If yes, a church attendance form should be attached to your application Yes D Are you applying on grounds of serious medical, physical, psychological, or social need? Evidence from professionals will be required. Yes No E Does your child have a sibling(s) living at the same address **already** Yes No attending Earley St Peter's Church of England Primary School? Name of child Date of birth Address of sibling SECTION 7 - DECLARATION Personal information contained in this form is subject to (EU) General Data Protection Regulations (GDPR). If you would like more information about how Earley St Peter's Church of England Primary School uses your data please see our Privacy Notice(s) which are available on the website. I understand that this information will be stored securely and may be shared with any appropriate agencies. The Keys Academy Trust reserves the right to carry out further investigations and require additional evidence to verify information contained in this form, including contacting the child's previous school. I enclose supporting information relating to (please tick): Section 6C Section 1 Section 2 Section 6B Other I declare that the information I have given on this form is correct and that I am the person with parental responsibility for the child named above.

I confirm that, to the best of my knowledge, the declared address beyond the start of school and I will inform the school admissions				
I have read and understood the admission arrangements and criteria for Earley St Peter's Church of England Primary School and have completed and submitted any additional or supplementary information forms which may be required.				
I understand that applications can take 20 school days to process once all supporting evidence has been submitted.				
I understand that any place offered may be withdrawn if I give fa	lse or misleading information.			
Signature of parent:	Date:			