

School Transfer Application Form

You must read the important points to note on page 7 of this form **before** you complete your application. Please do not detach or separate any part of this application form. Sections A, B and C must be returned as one complete form in order for your application to be processed.

Section A

Your child's details

Forename(s) _____ Surname _____

Date of birth _____ Male Female Current year group _____

Current address _____
_____ Post code _____

New address and moving date (*if applicable*) _____
_____ Post code _____

Current school your child attends _____

List below any previous schools your child has attended (*within the last three years*)

Previous school(s)	Date from	Date to
_____	_____	_____
_____	_____	_____
_____	_____	_____

School preferences

List the schools you want to apply to in order of preference below:

1 _____
2 _____
3 _____

If any of your preferences is for a Catholic or Church of England School, please state your child's religion below:

If a place is available at one of the above schools, when would you like your child to start?

Siblings (brothers and sisters)

Does your child have any siblings of school age? Yes No

Name of sibling(s)	Male/Female	Date of birth	School attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reasons for transfer

Please state your reasons for requesting a transfer (*continue on a separate sheet if necessary*)

Further information about your child

Does your child speak English? Yes No

If no, what is your child's first language _____

Ethnicity of child _____

Does your child have an Education, Health & Care Plan? Yes No

Is your child receiving Special Educational Needs Support? Yes No

Is your child looked after by a local authority? Yes No

If yes, please state the name of social worker and local authority involved _____

Was your child previously looked after and is now adopted or became subject to a child arrangements order or special guardianship order? Yes No

Does your child live with someone other than yourself? Yes No

If yes, please state the relationship with this person & how long this arrangement has been in place?

Is your child? A traveller child UK forces family An asylum seeker
 A refugee Permanently excluded None of these

Your details

Title Mr Mrs Miss Ms Other (*please state*) _____

Forename _____ Surname _____

Relationship to child _____

Email address _____

Home telephone _____ Mobile _____

Work telephone _____

Your first language _____

Do you speak/understand English? Yes No

Is there a court order in place which affects your right to apply for a school place? Yes No

Do all those with parental responsibility agree to this request? Yes No

Signature

I confirm that the information given on this form is correct. Information is collected in compliance with the Data Protection Act 1998. It will be used to allocate a school place and may be shared with other agencies, local authorities and other relevant officers within the council including Revenues and Council Tax.

Signature _____ Date _____

Relationship to child _____

Please note:

- If you are a new arrival from overseas you must complete Section B of this form.
- Once you have completed Section A and B of this form (if a new arrival from overseas), you must return the full application form to your child's current school for them to complete Section C.
- Please read the important points to note on page 7 **before** you submit your application form.

Section C

This section must be completed by the child's current school

Date form received _____

Is the child receiving support in any of the following:

- SEN PSP IBP IEP EHCP EAL

Please supply any reports/comments relating to the above on an additional sheet.

Percentage attendance for last school year _____% Current school year _____%

Is the child currently attending school? Yes No

Comments

Please provide details of any siblings currently attending your school

Name of sibling(s)	Male/Female	Date of birth	School attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please provide dates and reasons for any fixed term exclusions:

Is the child at risk of permanent exclusion? Yes No

Are there any issues that might be of concern to a receiving school
(e.g. bullying, disaffection, community issues etc)? Yes No

Additional comments

Does this application meet any of the Fair Access Protocol Categories? Yes No

If yes, which FAP/PPP Category? _____

PRIMARY ONLY: Age related expectations

Is the child reaching age related expectations?

SECONDARY ONLY: Details of qualifications being taken

Courses taken	Qualification type	Exam board	Predicted results
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

School signature

Name of school _____ Designation _____

Signed _____ Print name _____

Date _____

Once complete please return this form to:
Education Support Service, School Admissions Team, Dryden Centre, Evistones Road, Gateshead NE9 5UR.
Email schooladmissions@gateshead.gov.uk Telephone number 0191 433 8589

Important points to note before you request a school transfer

- This form can only be used if you are requesting a transfer to a Gateshead School.
- Sections A , B and C must be complete before we can process your request.
- Once you have completed Section A of the form, **you must** return the full form to your child's current school for them to complete Section C. Your child's current school will then forward the completed form to the Council to be processed once they have completed Section C.
- **Your form will not be processed unless all information requested is provided.**
- All persons with parental responsibility for the child must agree to the request before the transfer form is completed.
- We cannot guarantee that your child will be offered a place at one of your chosen schools as this will depend on the availability of places.
- If we cannot offer your child one of your chosen schools, we will inform you of other schools with places available for you to apply to.
- If you are new to the UK from overseas you must complete Section B of the school transfer application form and attach relevant documentary information.
- You can request a school transfer up to a maximum of six weeks prior to the school place being required. However, if your request is for your child to transfer school at the start of a new academic year, i.e. September, you can apply for a school place up to six weeks before the start of the school summer holidays, i.e. June of that year.
- If your primary school transfer request does not meet a fair access category, the primary schools you have applied to have ten school days to respond to this request.
- If your secondary school transfer request does not meet a fair access category, the secondary schools you have applied to have twenty school days to respond to this request. (Please refer to the Council's website for further information regarding the Fair Access process and complex transfers).

**Further information is available from The School Admissions Team –
telephone 0191 433 8589.**