

Office use only PID:

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High School Common Application Form 2015/16

This form is only for residents in the London Borough of Ealing applying for a transfer from Primary to High School for September 2015.

Deadline: 31 October 2014

Please apply on-time. Late applications can not be considered until after the offer date **02 March 2015**. If you apply late it is unlikely that your child will get a place in your preference school(s)

Your Child's Details

Last Name/Surname	<input type="text"/>
First Name	<input type="text"/>
Middle Name	<input type="text"/>
Date of Birth	Day <input type="text"/> <input type="text"/> / Month <input type="text"/> <input type="text"/> / Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address	<input type="text"/> <input type="text"/> <input type="text"/>
Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Current School Name	<input type="text"/>
Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Twin or Multiple Birth

Is your child a twin or multiple birth? YES NO

Statement of Special Educational Needs / Educational Health and Care Plan

Does your child have a statement of SEN/Educational Health and Care Plan? YES NO

If yes you do not need to complete this application please contact the SEN department as a place will be reserved for your child at the school named in their Statement/Educational Health Care Plan.

Looked After / Previously Looked After

Is your child currently in the care of a Local Authority?
If yes you will need to provide a letter from the child's social worker confirming the legal status of the child and the Local Authority they are in the care of. YES NO

Was your child in the care of a Local Authority immediately prior to becoming subject to an adoption order, residence order, special guardianship order or child arrangements order?
If yes you will need to provide a copy of the residence order, special guardianship order, child arrangement order or proof of adoption. YES NO

Exceptional Medical Social Claim

If you think that there are exceptional medical or social reasons why your child must attend a particular school you must claim this at the time of application and provide the appropriate supporting documentation. Please see the admissions criteria for the school you are applying to for details as not all schools give priority for exceptional/social need.

I want to claim exceptional medical/social circumstances for my first preference school: YES NO

Please note: If you do not provide professional evidence to support your claim it can not be considered.

High School Preferences

1

School Name

Postcode DFE no. /

Brother/sister already attending this school YES NO

If yes please provide details of the **youngest** brother/sister attending the school

First Name Date of Birth / /

Last Name Boy Girl

Reason for Preference
(Optional)

2

School Name

Postcode DFE no. /

Brother/sister already attending this school YES NO

If yes please provide details of the **youngest** brother/sister attending the school

First Name Date of Birth / /

Last Name Boy Girl

Reason for Preference
(Optional)

3

School Name

Postcode DFE no. /

Brother/sister already attending this school YES NO

If yes please provide details of the **youngest** brother/sister attending the school

First Name Date of Birth / /

Last Name Boy Girl

Reason for Preference
(Optional)

4

School Name

Postcode DFE no. /

Brother/sister already attending this school YES NO

If yes please provide details of the **youngest** brother/sister attending the school

First Name Date of Birth / /

Last Name Boy Girl

Reason for Preference
(Optional)

High School Preferences

5

School Name

Postcode DFE no. /

Brother/sister already attending this school YES NO

If yes please provide details of the **youngest** brother/sister attending the school

First Name Date of Birth / /

Last Name Boy Girl

Reason for Preference
(Optional)

6

School Name

Postcode DFE no. /

Brother/sister already attending this school YES NO

If yes please provide details of the **youngest** brother/sister attending the school

First Name Date of Birth / /

Last Name Boy Girl

Reason for Preference
(Optional)

Parent/Carer's Details

Parent/Carer (These must be the details of the parent or person with legal responsibility for the child)

Surname/Last Name

First Name

Relationship to child Mother Father Step parent Foster parent
 Social Worker Other relative Other

Home telephone

Mobile

Email address

Do you live at the same address as your child? YES NO

If 'No' you must provide your address with a written explanation attached to the application.

Alternative Contact (Optional)

Surname/Last Name

First Name

Relationship to child Mother Father Step parent Foster parent
 Social Worker Other relative Other

Telephone

Office use only	Actioned	Date	Init.	Notes
Address verified				
Sibling verified				
Date of Birth verified				
LAC status verified				
Med/Social verified				
Entered				
Entry checked				

Declaration and Signature

- I certify that I am the person with parental responsibility for the child named on this form and that the information given is true to the best of my knowledge and belief
- I understand that any false or deliberately misleading information given on this form and / or supporting information may render the application invalid or lead to the offer of a place being withdrawn
- I understand that by making this application I agree to other Council records being checked

Parent/Carer's
Signature

Day Month Year
Date / /

Data Collection Notice

Data Protection Act 1998

The information you have provided to the London Borough of Ealing in accordance with the Data Protection Act 1998 will be used to assist with your child's admission to school.

The Council has a legal obligation to protect public funds. We may therefore share the information you have provided with other departments of the authority and with other similar bodies for the detection and prevention of fraud.

You have the right to ask for a copy of the information about you held in our records. You must request this in writing to the Data Controller in ICT services.

You also have the right to require us to correct any inaccuracies in your information.

Checklist – before returning this form please ensure that you have:

Recommended:

- I have read the High School Prospectus 'High School Admissions 2015'
- I have attended the open evenings for my preferred schools to ensure I have made an informed choice
- I have listed my nearest non-faith school as one of my preferences
- I have read the admissions criteria for my preference schools to ensure I am making 'realistic' choices

Mandatory:

- I have completed every section of the application form not marked 'optional'
- I have attached proof of my child's date of birth e.g. Medical card
- I have read the declaration and signed and dated the application form

The completed form must be returned by Friday 31 October 2014 to either:

Your child's current Primary School (Maintained Ealing Schools only).

We strongly 'recommend that you submit your application form to the Primary school by **Friday 24 October 2014** so that the school can forward it to School Admissions before the half-term holiday

Or

Primary School Admissions, Perceval House, 14-16 Uxbridge Road, Ealing, W5 2HL

If you are handing your form in ask for a receipt or keep proof of postage as any applications received after the closing date can not be considered until after the offer date 02 March 2015.