Office use only	
Child's surname:	Year Group:
Date of Admittance:	



APPLICATION FOR IN-YEAR ADMISSION TO ST CECILIA'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.

school. Your completed appr	school. Four 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/admissions .								
SECTION 1 – APPLICATION INFORMATION								
Date from which admission is required	Day	Month	Year					
Reason for your application (please tick as appropriate)	the United Kingdom							
	B Moving to the Wokingham Borough due to a posting to the area (applicable to Crown Servants and Service personnel)							
If moving from abroad we will need to see your and								
your child's passport and								
any necessary visa(s).	E Wanting to transfer schools but not moving							
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: Post code: County:

Address of proposed new Anticipated date of move: address, if moving House number: House name: Street: Evidence of move will be required. Town/Village: County: Post code: Please advise if there are any changes to these plans New home telephone number: as this may affect the allocation of a school place. Have you exchanged contracts or completed, or are you in receipt of a signed rental agreement for this property? (Please submit this information with your application when it is available). Yes No

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

SECTION 6 – ADDITIONAL INFORMATION A Does your child have an Education, Health and Care Plan (EHC)? Yes Nο B Is the child looked after or previously looked after by a local authority? Yes No Relevant supporting information will be required. Name of local authority: C Are you applying on grounds of serious medical, physical, psychological, or social need? Evidence from professionals will be required. Yes No D Does your child have a sibling(s) living at the same address No Yes already attending St Cecilia'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 St Cecilia'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 1 Section 6C 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 will continue to be the child's residence beyond the start of school and I will inform the school admissions team of any changes. I have read and understood the admission arrangements and criteria for St Cecilia's CE 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 false or misleading information.					
Signature of		Г			
parent:		Date:			