Primary In Year Transfer Application Form



You must read the Primary In Year Transfer - Information Booklet for Parents before applying.

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Section 7 of this form must be completed by your child's relocating from overseas.	current/last school before submitting, unless you are			
Incomplete application forms will not be processed.				
Section 1 - Child's details	For Office Use Only: NCY			
Surname:	First name:			
Child's date of birth:	Child's gender: Male Female			
Child's current address:				
	Postcode:			
How long has the child lived at this address?	Years Months			
Does the child have a statement of special educational n Plan?	eeds/Education, Health & Care Yes No No			
Is the child in care? Yes No If	yes, to which Local Authority?			
Has the child formerly been in care? Yes No If yes, you will need to provide a copy of one of the following, to be considered under this criteria				
Adoption Certificate Special Guardianship Orc	der Child Arrangement Order			
Is the child a Refugee/Asylum Seeker? Yes No	If yes please give NASS number			
Is the child a carer? Yes No	Is the child known to the criminal justice system?			
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Section 2 - Reasons for your application				
Relocation from overseas* Yes No Where from?				
What is your nationality?				
House move into or within Warrington* Yes No No				
If you are moving to (or within) Warrington please insert the address details of where you are moving to:				
Postcode: Date of move:				
Bullying / unhappy** Yes No Have you discussed your reasons Yes No for moving schools with your child				
* If you are moving into or within Warrington you should provide proof of your new address. Acceptable proof would be a tenancy agreement (minimum of 6 months tenancy will be accepted), a copy of the exchange of contracts or a council tax/utility bill.				
**If your reasons are due to bullying or that your child is unhappy at school, you are strongly advised to discuss your concerns with your child's current school. A school move may not necessarily resolve any problems relating to these issues				

Section 3 – Current School Details			
Name of current school:			
Address if not a Warrington school:			
	Postcode:		
Date Started :			
	Yes No		
If no, please give last date attended			
How many schools has your child attended in the last 12	months:		
Name all previous schools attended – please put most re	cent school first		
School:		Date From	Date To
Address:			
Postcode:			
Reason for leaving:			
School:			Date To
Address:			
Postcode:			
Reason for leaving:			
School:		Date From	Date To
Address:			
Postcode:			
Reason for leaving:			L

Section 4 – School Preferences Please state your prealready attending, medical, ease of travel, distance, social attendance at the school).				
1.				
Name and date of birth of sibling if applicable:				
Reason:				
2.				
Name and date of birth of sibling if applicable:				
Reason:				
3.				
Name and date of birth of sibling if applicable:				
Reason:				
Section 5 - Applications for faith schools only				
If any of your stated preferences are for a faith school you may need to complete the school's supplementary form as well as this form, and return it to the school by the date they request.				
Is your child Baptised Catholic Yes \square No \square	Church of Baptism			
Date Baptised	Church Parish of residence			
Is your child Baptised Christian Yes No	Church of Baptism			
Date Baptised	Church Parish of residence			
Is your child of another faith Yes \(\square\) No \(\square\)	Please state			
The school may carry out additional checks and proof of k religion may be required.	paptism or a letter from an appropriate minister of			

Section 6 – Appl	icant Details			
Mr/Mrs/Miss/Ms	First name:	Surname:		
Does the child live v		Yes	No 🗆	
If no, please give yo	•	163 L	NO L	
ii iio, piease give yo		t code:		
·	elationship to the child?	Mum □	Dad \square	Sibling 🗌
Grandparent \square (Other (please specify)			_
Do you have parent	cal responsibility for the child?*	Yes \square	No 🗆	
Is the child privately	y fostered by you Yes No	Is the child an student	exchange	Yes No
· ·	d in England and Wales, parental responsibility ld's parental responsibility if:	y is automatically	given to the c	hild's mother from birth.
	the child's mother when the child was born (•	•	ted)
	n after 1 December 2003, and he is named on			
	onsibility agreement is obtained from a court of	or by agreement v	vith the moth	er
Parental Declara				
	II of the information I have given on this for a sc y given false information, the offer of a sc		•	
I understand that you will share the information with the schools on this form and, if different, the allocated school.				
I understand that Se	ection 7 of the form must be completed b	y my child's curr	ent school b	efore submitting.
I have enclosed proof of address (if required).				
Signature:	D	ate:		
Home telephone nu	umber: N	lobile:		
Email:				
The Completed a	application form should be returned	d to :		
The School Admissions Team, Families and Wellbeing Directorate, New Town House, Buttermarket Street, Warrington. WA1 2NH.				
Or alternatively you can scan a copy of the form to schooladmissions@warrington.gov.uk				
Transport to school				
Please do not confuse the right to express a preference for a school with an entitlement to travel assistance. Please note that if your application is successful there will be no assistance with transport unless your child qualifies under the terms of the School and College Transport Policy.				



Section 7 – This section must be completed by the child's current or last school attended unless you are relocating from overseas.

Notification of Request for an In Year Transfer

This section must be completed by the designated In-Year Admissions Lead (IAL) at the child's current school.

This section is used to help assess whether the child's application is processed through the Fair Access Protocol. Please provide as much detail as possible, bearing in mind what information you would wish to know if the situation were reversed and the application was for your school.

Please be aware that applications will not be processed without a completed Section 7 and incomplete application forms will be returned.

Form completed by:

Has a discussion taken place with parent/carer exhausted all possibilities of the child remaining	Yes No No	
Has the possibility of a managed transfer been discussed with parents and preferred schools?		Yes No
Name:	Position:	
Tel Number:	Email address:	
Signature:	Date:	

Section 7 (to be completed by current or last school attended)					
Child's first name:		Child's surname:			
Date of birth:		NCY:			
Current School:		Date last attended	d:		
Is/does the child (Please comple	te in full)				
Child in Care or Formerly in Care	Yes No	An EHCP		Yes	No
Refugee or Asylum Seeker	Yes No	Current K or medi without an EHCP	cal support but	Yes	No
Carer	Yes No	Pupil Premium		Yes	No 🗌
Service family	Yes No	Known to the Criminal Justice System		Yes	No
Gypsy, Roma or Traveller family	Yes No	CAF		Yes	No 🗌
Outside Agency involvement: Please give details of any outside agency who are currently involved with this child. (Do not include any historical involvement)					
Agency	Contact name		Contact Tel No	umber	
CAMHS					
Child Protection/Safeguarding					
Social Services/Family Support					
Educational Psychologist					
Other agencies, please state					
Attendance					
This academic year	% overall attendance	% unauthorised attendance			
Last academic year	% overall attendance	% unauthorised attendance			
Has your Attendance Officer been	involved?		Yes		No 🗌
Behaviour support and exclu	isions				
Permanently excluded?		Yes	No [
Has the child had a period of exclusion in the last 12 months? Yes No					
Has the child accessed support from alternative provision? Yes No					
Has Behavioural Support been required? Yes No					
Assessments Please provide the most up to date assessments for the child.					

Please use a separate sheet if you wish to provide any additional information.