REQUEST FOR ADMISSION OUTSIDE THE NORMAL AGE GROUP

For into a year group different to that determined by date of birth.
Including delayed admission to reception for summer born children.

This is not a school application form – you **must** also complete a school preference form for your child to be considered for a place at your preferred school(s).

Please complete and return this form using the contact details below:

Coastal Learning Partnership
Heathlands Primary Academy
Andrews Close, Springwater Road, Bournemouth, BH11 8HB

admissions@coastalpartnership.co.uk

YOUR CHILD'S DETAILS

Last name (Legal name)

First Name Middle Names(s)

Known as last name (if different)

Date of Birth / / Gender: Male Female

Current school, pre-school or nursery (if any)

Does your child have an Education Health & Care Plan (EHCP)? YES NO

Is this an application for a local authority 'Looked After' child (i.e. in foster care) or previously Looked After child? YES NO

Are all parties with Parental Responsibility in agreement with this request? YES NO

If not, why not?

Child's permanent home address

Postcode

Is this also YOUR permanent address? YES NO

If not, what is your address?

PARENT/CARER NAMES(S) and DETAILS

Mr/Mrs/Miss/Ms Contact number

Email address

What is your relationship to the child?

WHICH SCHOOL(S) IS THIS REQUEST FOR:

1st Pref: **2nd Pref:**

3rd Pref: **4th Pref:**

Please set out clearly whether you are asking for your child to be advanced to a higher year group, for your child to repeat a year, or to delay their admission to reception by one year.

Please explain all your reasons for requesting your child be admitted outside their normal year group attaching any reports and information that you have that are relevant to your application.

Useful information/documentation might include:

- Your child's educational history
- Indication of your child's wishes where practical/age appropriate
- School or other educational reports
- Existing professional reports and assessments e.g. educational psychology reports
- Health information eg from your child's specialist
- Exam courses being followed where appropriate

If you have other information specific to your child that you feel would be helpful that does not appear on this list above please forward this with your application.

Please note that it is your responsibility to ensure that any documents are obtained and attached to this form so that the full circumstances of your request can be considered by the Panel.

Continue on a separate sheet if necessary

DECLARATION

You may only submit an application if you have parental responsibility for the child. If there is joint responsibility, this application must be discussed with everyone who has parental responsibility and agreement reached for this form to be submitted. By submitting this application, you are confirming that you have sole parental responsibility for the child or that there is agreement between all persons who have parental responsibility.

I have parental responsibility for or look after the child named on page 1. To the best of my knowledge, the information I have given is correct and complete. I will advise the Admissions Team, in writing, of any changes to the information on this form. I understand that the provision of false or misleading information may lead to the withdrawal of the offer of any school place either prior to or during the school term. I also understand that the information I have submitted on this form is covered by the Data Protection Act 2018.

General Data Protection Regulation (GDPR) and Data Protection Act (DPA) 2018 - We process your personal information in accordance with GDPR and Data Protection Act 2018. If you would like to know how we use your information, please see our Privacy Notice on the Coastal Learning Partnership website.

In accordance with the DPA 2018 we are required to keep the information we hold about you up to date and accurate. By signing this form you are confirming the information is correct.

Signature **Date / /**

Name (block capitals)