

PRIMARY
IN YEAR COMMON APPLICATION FORM (CAF) 2021-2022
This form should be used for applying for primary schools in North East Lincolnshire

Section A: Pupils Details

First Name (s)							
Surname							
Gender							
Date of birth	/		/				
Year Group	Y Rec. <input type="checkbox"/>	Y1 <input type="checkbox"/>	Y2 <input type="checkbox"/>	Y3 <input type="checkbox"/>	Y4 <input type="checkbox"/>	Y5 <input type="checkbox"/>	Y6 <input type="checkbox"/>
Home Address							
Post Code							

Is the child Looked After (in public care)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Was the child previously Looked After (previously in public care)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the child Internationally Adopted Previously Looked After	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the child have an Education Health and Care Plan (EHCP) ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

OFFICE USE ONLY:

CAPITA / SEN CHECK (√ / X)

Date:

Initials:

Section B: Parents/Carers Details

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other <input type="checkbox"/>
First Name (s)					
Surname					
Are you the child's	Parent <input type="checkbox"/>	Carer <input type="checkbox"/>	Social Worker <input type="checkbox"/>		
Telephone Number					
Mobile Number:					
E-mail address					
Is there anyone who should not have access to, or information about the child?	Yes <input type="checkbox"/>				No <input type="checkbox"/>
If Yes please specify who and for what reason					

Section C: Current School Details

Current School	
Address	
Telephone Number	
Last date attended (if left)	

Section D: Reason for Admission/Transfer

Reason for admission / transfer request (If you have moved house please give the old and new address and date of moving. Please note we may request some evidence of the move)

Section E: Other Information

If you are requesting a transfer due to a change of address or for any other reason, have you informed your child's current school? Yes No

If you do not wish discuss the transfer with your child's current school, please advise the reason for this below and sign. *Please note this information is for the school admissions team only and will not be disclosed to your child's current school.*

Parent/Carer Signature

Are there any other agencies/services involved with the child/family? Yes No if yes, give details below

Does your child have any additional learning/medical needs? Yes No if yes, give details below

Section F: Requested School Details

First Preference.....
Reasons you think are relevant, eg – Catchment/***Sibling (brother/sister) attends**/Distance/ Religion or Faith/Other

* **Name of Sibling:** _____ **DOB:** _____

Second Preference.....
Reasons you think are relevant, eg – Catchment/***Sibling (brother/sister) attends**/Distance/Religion or Faith/Other

* **Name of Sibling:** _____ **DOB:** _____

Third Preference.....
Reasons you think are relevant, eg – Catchment/***Sibling (brother/sister) attends**/Distance/ Religion or Faith/Other

* **Name of Sibling:** _____ **DOB:** _____

NOTES:

- Although you are asked to give reasons for each preference the Admission Authority can only apply the reasons if they are part of the published admission criteria.
- If you are requesting a Faith School as a preference you may be asked to complete a supplementary form.

If all of the relevant sections have not been completed or if information is incomplete, the form will be returned to you and this could delay your application. Therefore, please ensure you complete the form in as much detail as possible.

Section G: Declaration

I confirm that by signing this document, where more than one person shares parental responsibility for the child, I have consulted and agreed with that person on this application prior to submission.

In addition I am aware that where parents/carers share equally parental responsibility for the child then only one address can be considered and this is the one nominated on this CAF (this will be verified by the local authority on behalf of all admission authorities. Note: Documentary evidence may be requested). **I declare that the information provided is correct.**

Information Sharing and Consent

I understand that the information I have provided to North East Lincolnshire Council regarding my child and family will be recorded and used for the purpose of providing services, support, advice and guidance to my child and family. I agree to my family's personal information being processed and shared by North East Lincolnshire Council with appropriate partners and organisations to enable them to provide us with services, support, information, advice and guidance in order to achieve a positive outcome for me and my family. North East Lincolnshire Council is the Data Controller for the processing of my personal information and that will process all personal information in accordance with the Data Protection Act and GDPR.

Name: _____

Signature: _____

Parent / Carer / Social Worker (Delete as appropriate)

Date: _____

What do I do next?

Unless you have signed Section E above you should give the whole form to your child's current school. They should complete page 4 of this form and then return it back to you. You should then send the whole form to:

**School Admissions Team, Access and Inclusion Service,
Civic Offices, Knoll Street, Cleethorpes, North East Lincolnshire, DN35 8LN
(schooladmissions@nelincs.gov.uk)**

