St Joseph's Catholic Primary School In-Year Application form

If your child has an EHCP and/or is Looked After, please do not complete this form and contact your area office.

Reason for transferring schools: Please tick appropriate box(s)			
☐ Moving to Lancashire from outside of the UK (Please state Country):			
☐ Moving to Lancashire from anoth			
☐ Moving from one area of Lancasi	- `		
□School to School Transfer within	•	ite area).	
□ Leaving Private Education:	the same authority.		
Leaving Elective Home Education	n·		
☐ Other (Please state):	· I.		
Other (Ficase state).			
You must complete an application for every child (i.e. one each for twin/sibling) who requires a school place.			
		T	
Child's Legal Surname:		Child's Forename(s):	
Child's Date-of-Birth:	School Year Group:	Age:	Male/Female:
	-		
Child's home address (current):		Child's new address (if you are moving):	
Postcode: P		Postcode:	
1 ostoodo.		Date of move:	
Name of Parent/Guardian(s): Parental Responsibility: Yes □ No □			
Home address (If different to child's):			
Postcode:			
Is English the first language spoken? By Parent: Yes \square No \square By Child: Yes \square No \square			
If no please state first language:	By Parent:	By Child:	
Contact details	Home number:	,	
	Mobile number:		
	Email address:		

Current School (If applicable)

Authority	Establishment Name/Address	Date from:	Date last attended:

Previous Schools/Educational Placements within the last 3 years

Authority	Establishment Name/Address	Date from:	Date last attended:

Details of siblings who will be attending the school now being applied for. (Siblings include brothers and sisters, stepchildren, half brothers and sisters, adopted and foster children living with the same family at the same address).

Name(s)	Date of Birth	School	Male/Female

Pupil Background

(Previous Education/Support History (Please tick as appropriate)			No
Is this pupil in care (Looked After/Previously Looked After)?			
If yes, to which Local Authority	·		
Children's Services involvement?			
If yes, please provide social worker's name:			
Previously Permanently Excluded?			
Previous Exclusion Record?			
Are you a Crown Servant? If you are UK service personnel or other Crown Servants living abroad with your family please tick YES. You will need to provide an official MOD, FCO or GCHQ letter declaring your relocation date and address.			
Special Educational Needs Status (SEN)	Education Health and Care Plan (EHCP)		
	Under Formal Assessment		

Additional Information About Your Application/School Prefe		
Additional information to support your application may be proviced relating to the pupil and/or the family. Evidence from an approprican be attached. Please continue on a separate sheet if necess	riate professional (e.g. doctor, health visitor, social worker)	
Signature(s) I/We confirm that the information provided is accurate at the time authority and/or Local Authority have the right to verify the inform offer of a place will be based upon this application and that an obeen made in relation to inaccurate or misleading information. In and date of birth prior to or after taking up a school place if reque child is currently attending to seek background information in reagencies.	nation given on this application. I/We acknowledge that the offer may be withdrawn if subsequently it is found to have /we will provide evidence of the pupil's permanent address ested. I/We give permission to contact the school where my	
Parent(s)/Guardian(s)	Date	
Submit this application form to: Helen Clarkson Admin Officer St Joseph's Catholic Primary School Cedar Road Chorley Lancashire PR6 0JF	Telephone / Email 01257 265998 helenc@st-josephs-chorley.lancs.sch.uk	