



North Tyneside Council

widening
horizons

Children, Young People and Learning Directorate IN YEAR APPLICATION FORM

This form should be completed by North Tyneside residents when requesting a school place after the start of the Autumn Term i.e. September and for year groups other than the year of entry to a school.

I wish to make an application for my child to be admitted to a First, Primary Middle, or High School and set out below the relevant information.

In the space below please write in order of priority which school(s) you would prefer your child to go to, you may include schools outside of North Tyneside. It is recommended that you name more than one school and give reasons for your preferences below. If your preferred school is a Voluntary Aided School or Academy you may be asked to provide evidence to support your application.

Preferred Schools

1.
2.
3.

Reason for asking for your preferred schools (please tick the boxes that apply)

1. Their older brother or sister will be attending the preferred school

Name of Brother or Sister:

Date of Birth:

School Attending:

2. Moved into North Tyneside

3. Moved house within North Tyneside area

4. Faith reasons 5. Other reasons

Please note if option 3 or 4 is ticked you must give brief details and also ensure that **Section B** of this form is completed by the Headteacher of your child's current school.

You may confirm that the school is your local school or you may describe any exceptional medical/social reasons for stating a particular school, in which case, please attach supporting evidence from the professional dealing with your case e.g. social worker, doctor or psychologist.

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PUPIL DETAILS

Surname of Child:

First Name of Child:

Date of Birth: Male Female

Parental Home Address:

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..... Postcode:

Daytime Contact Tel. Number:

E-mail Address:

Nationality and first language:

Please indicate your relationship to the child by ticking one of the following:

Mother Father Step-parent Carer Social Worker Other

Is the child in the care of a Local Authority? Yes No

If Yes, please state which Local Authority:

Please give the name of the Social Worker:

Has the child previously been in care but immediately after being in care became subject to an adoption, residence or special guardianship order?

Yes No

If you tick **Yes** your application **must** be supported with documentary evidence

Does your child have any disability or diagnosed medical condition, e.g. epilepsy, of which the School or Local Authority needs to be aware of that, would make it difficult for your child to take part in school activities?

Yes No

If yes, please specify

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Does your child have a Statement of Special Educational Need? Yes No

Name of child's current or previous school:

Please state the address and date attended if the school if it is outside North Tyneside

Name/address/tel no	Headteacher	Dates attended