



This form is for children moving to a Dorset school part way through the school year, or in September but not in the normal year of entry for that school. You do not have to be a Dorset resident to complete this form. If you wish to apply for schools in another area please contact the relevant local authority.

If your child has an Education, Health and Care Plan (previously known as a Statement of Special Educational Needs), you should not complete this form. Please contact the [Special Educational Needs Team](#) who can advise of the next steps.

Before submitting a form, please read the [Parents' Guide and the Admissions Policy](#). This will tell you what information you will need to provide and whether the school you are applying for has an additional form to complete. **Ensure you attach all supporting information to this form.**

If you need help with the application please contact Dorset Direct 01305 221060 who can help you complete the form.

Child's Details

Child's Legal Surname:	Child's Forename(s):	
Known as Surname: / / (if appropriate)	<input type="checkbox"/> Male/ <input type="checkbox"/> Female	Date of Birth:
Current <input type="checkbox"/> /Previous <input type="checkbox"/> School:		
Is your child currently attending school? <input type="checkbox"/> YES/ <input type="checkbox"/> NO		

Address Details

Current Address:	Postcode:

Future/Previous Address (if moving house):	Postcode:

(Expected) Date of Move:	

Please tick which address you would like your application to be considered from:

We can only base your application on your future address if you have supplied us with evidence of this address. See [Parents' Guide](#) for further information.

- Current address Future address

We aim to provide a school place at your highest preference wherever possible. However, there is no guarantee that you will get your preferred school. Even if you move into the catchment area the school may already be full. We advise all parents and guardians to consider naming more than one preference. You can contact the [School Admissions Team](#) to discuss availability, check your catchment school or if you need additional information.

FIRST PREFERENCE SCHOOL

School Name:

Medical reasons (*You must supply evidence*)

Social Reasons (*Child protection/ vulnerable child*)

Feeder School

Distance

Catchment Area

Sibling

Religious (*You must supply evidence*)

Ability or Aptitude Testing

Other reasons for your preference:

SECOND PREFERENCE SCHOOL

School Name:

Medical reasons (*You must supply evidence*)

Social Reasons (*Child protection/ vulnerable child*)

Feeder School

Distance

Catchment Area

Sibling

Religious (*You must supply evidence*)

Ability or Aptitude Testing

Other reasons for your preference:

THIRD PREFERENCE SCHOOL

School Name:

Medical reasons (*You must supply evidence*)

Social Reasons (*Child protection/ vulnerable child*)

Feeder School

Distance

Catchment Area

Sibling

Religious (*You must supply evidence*)

Ability or Aptitude Testing

Other reasons for your preference:

Reason for changing school:

Date Place Required:**Siblings**

Please provide details of any siblings and schools they are/will be attending

NOTE: Siblings must be identified as having the same home address (see Parents' Guide for clarification)

Child's Name: Date of Birth: School:

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Religious/Faith Reasons

Are you involved with the life and worship of a church?

 YES/ NOIf **YES**, please provide details of your vicar/priest/minister/leader:

Vicar/Minister's Name:

Address:

Name of Church attended:

Denomination:

Has your child been baptised/ christened?

 YES/ NO**Important:** Please check the admissions policy for the school you wish to apply for. The policy states clearly the evidence you need to send in, in order for us to consider your application under religious/faith criteria and whether the school would like you to complete a supplementary information form.*If this information is not received or endorsed, or is insufficient, your application will not be considered under these criteria, but will be considered under the next appropriate criteria.***Child in (or previously in) Care**

These are children who have had a full or interim Care Order or children who are or have been accommodated under Section 20/22 of the Children Act 1989. This includes children who have been subject to an adoption, residence or special guardianship order.

Is this application for a Child currently in Care? YES/ NOIs this application for a Child previously in Care? YES/ NOIf **YES**, to which Local Authority:

Does your child meet any of the following criteria?

Has been permanently excluded from school?

 YES / NOHas had 15 days (secondary)/ 5 days (primary) or more days of fixed term exclusions from school? YES / NOIs attending Education Other than at School i.e. a Pupil Referral Unit/Learning Centre? YES / NO

If you have answered yes to any of the three questions above **please provide further details:**

(continue on a separate sheet if necessary)

Has a multi-agency team identified your child's needs? YES/ NO

Does your child have any disability of which a school should be aware of where adaptations to the school or specialist equipment would be required? YES/ NO

Is your child the subject of child protection issues? YES/ NO

If you have answered YES to any of the above **please provide details:**

(continue on a separate sheet if necessary)

Is the Child's Parent/Guardian in the HM Armed Forces? YES/ NO

Parent/Guardian Details

This application must be completed by the parent who has care of the child for the majority of school days/weeks (unless a Court Order states differently).

Mr/Mrs/Miss/Ms:

Relationship to Child:

Address (if different from child's):

Tel No:

Mobile Tel No:

Email address:

Children in Care ONLY

Details of **Social Worker:**

Mr/Mrs/Miss/Ms:

Tel No:

Details of **carer:**

Mr/Mrs/Miss/Ms:

Tel No:

Address (if different from child's):

Declaration:

You are only allowed to submit an application if you have parental responsibility for the child. If there is joint parental responsibility, this application must be discussed with everyone who has parental responsibility and an 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.

You are confirming that checks can be made by the Local Authority if necessary to verify the information provided. You are accepting that the Local Authority reserves the right to withdraw school places which have been obtained by providing incorrect or misleading information.

You are also confirming that all details are correct to the best of your knowledge and that you have read the parents guide. If you do not have parental responsibility, do not submit this application.

Signature:

Date:

(If sending this form by email, please type your name in the signature field – this will act as your digital signature)

DATA PROTECTION

The information that you give on this form will be used by the Council for the purpose of processing your application for a school place & school transport where appropriate for your child. The information will be shared with schools, the Department for Education, and where relevant and pertinent to your application, diocesan bodies, appeal panels and with other local authorities and schools in their area. It will not be used for any other purpose unless required to do so by law. A record of the information you provide will be kept whilst your child is of compulsory school age plus a further academic year. Should you have any queries about Data Protection more detailed information is available on our website at

www.dorsetforyou.gov.uk.

Please submit your form by doing one of the following:

Email to: admissions@dorsetcc.gov.uk

Post to: School Admissions Team
Dorset Council
Dorchester
Dorset
DT1 1XJ

Please note: It is the parent/carer's responsibility to ensure that the completed application form and ALL supporting documents arrive safely. If you would like a receipt of your posted application form, please provide a stamped addressed envelope with this application. If you hand this in at a school you may wish to ask for a receipt.

Please contact School Admissions if you need this form in Braille, large type or another language.