In-Year Transfer Application Form

County:

Altwood CE Secondary

Braywick Court Primary

Cheapside CE Primary

Charters

This application is for children wishing to apply for a transfer to RBWM <u>Voluntary Aided school</u>, <u>Academy or Free School as</u> <u>listed below</u>



St Edwards RF Middle

St Francis Catholic Primary

St Marys Catholic Primary

St Michaels CE Primary

You should complete a separate application for each school to which you wish to apply and return the form directly to the relevant school.

Please ensure you read the Guide to In-Year Admissions before completing this application form. This guide is published online at www.rbwm.gov.uk

Holy Trinity CE (Sunningdale)

Desborough College

Holyport CE Primary

Furze Platt Senior

Churchmead CE Secondary		Holyport College			St Peters CE Middle		
Clewer Green CE		Knowl Hill Academy			The Royal		
Cookham Dean CE Primary		Lowbrook			Trinity St Steph	Trinity Št Stephen CE First	
Cox Green		St Edmund Campion Catholic		White Waltham	n CE		
Datchet St Marys CE Primary			lwards Catholic				
Which school	ol (lis	ted abo	ve) are y	ou applyir	ng for? Name	one school only	
School							
This application shoul Form (SIF) required b			to the school	listed above, alor	ng with any Supplei	mentary Information	
Your child's	deta	ils	Please fill in t	his form using bla	ck or blue ink and	CAPITAL LETTERS	
Surname:							
First name:				Middle name:			
If your child has been name please enter it I		by another					
Г	Davi	Month	Year	7	Female	Male	
Date of birth:	Day	MONTH	rear	Gender:	remaie	iviale	
Most recent school: Name:			Town:				
Current Add	ress	details					
	House name / number:						
Your child's current address and postcode - This must be your child's current, permanent address. Any place gained by using a fraudulent address will be withdrawn.		Street:					
		Town / Village:					

Postcode:

Parent/Carer details						
Mr/Mrs/Miss/Ms Initial Surname						
Home Tel. No. Mobile Tel. No						
Email Relationship to	Child					
Additional details Please tick the app	ropriate box below for each question					
Does your child have a statement of special educational needs? (If yes, please contact the RBWM SEN Department on 01628 796779)	Yes No					
Is your child in the care of the Local Authority? (If yes, please attach documentary evidence)	Yes No					
Has your child been absent for a total of more than 4 weeks in the last year?	Yes * No					
Has your child ever been given a fixed term exclusion from a school?	Yes * No					
Has your child ever been permanently excluded from a school?	Yes * No					
Have you had contact with an Education Welfare Officer or Social Services?	Yes * No					
Us	re and attach a separate sheet if required					
Transfer Details						
When are you looking to transfer your child? (ASAP or Date)						
Are you transferring schools due to a change of address? (If yes, please provide details of your new address and your approximate move in date)						
Are you requesting to transfer schools but not moving address? (If yes, please state your reasons for transferring schools below)						
If you are a Service/Crown Servant family due to move into the area please tick here. (Please provide evidence of posting)						
Does your child have a sibling (brother or sister – this includes half, adopted, or foster sibling) attending the school currently?						
If you have ticked yes, please provide details below:						
Name	Date of Birth					
Sibling/s						

dates of any planned move		. Use this space	to list any pre-	vious addresses and the
Lood toocharis C	lanatura			
Head teacher's S				
If you are transferring from child's current Head teache not provided.				
Head teacher's signature:				
Delet Norm				Data
Print Name:				Date:

Please use the box below to note down your reasons for requesting an in-year transfer along with the

Declaration

- I declare that I have read and understood the online 'Guide to In-Year Admissions'.
- I declare that all the information I have given on this form is correct.
- If you deliberately give false information, you must expect that we will withdraw the offer of a school place.
- Data Protection Act 1998 The personal information collected on this form will be passed to RBWM for the
 administration of school admissions. This information will only be used for the purposes of applying the
 relevant admissions policy. RBWM may also use this data in connection with the prevention or detection of
 other fraud or crime.
- The School is entitled to request further information to verify the details given on this form are correct.

I enclose:

a) Proof of your address; i.e. recent utility bill, council tax statement, signed tenancy agreement (if I have never supplied proof previously to this school)

Forms will be returned if evidence is not provided

- b) Evidence that I have completed the sale, or ceased rental, of my previous property (if I have moved address and my previous address was within commutable distance of this school)
- c) Any Supplementary Information Form (SIF) required by the school

Your signature:			
Your full name:			
Date:	Day	Month	Year

Please send your completed form to the school to which you are applying

We advise that you keep a copy of the application form for your own reference.

If you require any assistance with completing this form please either call your preferred school for advice or for general advice please call the RBWM Customer Contact Centre on 01628 683870