

**School Admissions Service**

**IN YEAR APPLICATION FORM**

**(PLEASE USE ONE APPLICATION FORM PER CHILD)**

**Before you complete the application form please read the Notes of Guidance** [**www.bedford.gov.uk/inyearadmissions**](http://www.bedford.gov.uk/inyearadmissions) **This form should be used for in-year admissions only. Please complete only one form stating your preferences. If you complete more than one form it may adversely affect your application.**

**DO NOT use this form if your child has an Education, Health and Care Plan.**

**If you need help in understanding or completing this form please contact the School Admissions Service.**

**Please complete this form in BLOCK CAPITAL LETTERS using BLACK INK.**

**If you are a parent or carer with parental responsibility and you would like to apply for a school place within Bedford Borough Council, you must complete this application form.**

**It is important to make sure that the information you provide is factually correct.**

**Parents have been known to give a false address to improve their chances of getting a place at a particular school. Please note that any offer made will be withdrawn if we find that the parents have given false information.**

**REASON FOR YOUR APPLICATION**

**Moving into Bedford Borough (evidence of new address required)**

**Moving to another address (evidence of new address required)**

**Not moving address but wishing to change schools (Give reason in Section E)**

**Section A Name of School(s) Requested**

You may nominate up to three preferred schools. These may be community, foundation, voluntary aided, voluntary controlled schools or academies. One of these would normally be your catchment school. Naming only one school, or naming the same school more than once, will not increase your chance of being offered a place.

**Order of preference**: **Name of School: Start date:**

1

 Preference:

 Preference:

2

3

 Preference:

**\*If a place cannot be offered for my child at any of the schools I have listed above, I wish my child to be considered for a place at my catchment area school.**

\* If you do not want your child to be considered for a place at the catchment area school, please delete the sentence above. However, if you do this, a place may not be available at either your catchment area school or a school close to your home**.**

**Section B Pupil Details**

Pupil’s surname: First name(s):

Pupil’s address at time of application:

 Date of birth (dd/mm/yyyy):

Postcode:

 Gender (please tick): Male: Female:

Name(s) of parent(s) or carer(s) with parental responsibility:

Forename:

Surname:

Title (Mr/Mrs etc):

Mobile tel no:

Relationship to child:

Home tel no:

Email address:

Name and address of current/previous school and dates of attendance:

Headteacher’s Name:

Telephone Number:

 **Yes No**

Has your child been excluded from their current school or a previous school?

 **No**

(including fixed term exclusions)

If yes, please give details

e.g. fixed or permanent

Is the child known to any other agencies (eg Police, Youth Offending **Yes No**

or Social Services) ?

 **No**

 **No**

If yes, please give details

**Please note that any offer made will be withdrawn if we find that the parents have given false information**

**Section C Other Children**

If you have another child who also lives at the above address and will still be attending one of the schools you have nominated, please give details below. **Do not use this section to apply for a school place for another child, you must use one form per child.**

**Name: Date of birth: School attending:**

**Section D Religious Grounds**

If one of the schools you have listed in Section A is a voluntary aided school and you are applying for a place on religious grounds, please give details.

**Name of school or schools from Section A: Your denomination/faith:**

**Reason for choosing school(s). Name of faith leader, place of worship and address:**

**If you are applying on religious grounds you will need to complete the appropriate confirmation of religious affiliation form which is attached to this application.**

**Section E** **Other Information**

 **Please tick**

**Other information about your child**

 **Yes No**

i) Is this application for a “looked after” or previously “looked after” child?

 **(See In-Year Guidance Notes for definitions).

 Please provide in the Additional Information box below: Name**

 **of Authority, Date the child became “Looked After” and Name / Contact**

 **details of the Social Worker.**

ii)Does your child have an exceptional medical reason why he/she

 should be given priority for admission to one of the schools in

Section A? (See Notes of Guidance for further information)

**Please provide details in the Additional Information below**

iii) Are you moving from abroad to live in the UK? **If so, you must provide a copy**

**of the relevant pages of your child’s passport and your passport and visa (if**

**applicable) to confirm that you and your child have the right of abode in the UK.**

iv) Does your child have a parent/carer who works at any of the schools in Section A
 (If yes, please give details below)

**Additional Information**

Please use the box to give reasons for your application and provide additional information to support this.

Please continue on next page…

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| --- |
| **Declaration****I, having parental responsibility for the named child, state that, to the best of my knowledge and belief, the information that I have given is correct and complete and that this is the only application form I have completed. I will advise the School Admissions Service, in writing, of any changes to the information on this form. I understand that the provision of incorrect information could lead to the withdrawal of any offer of a school place. I also understand that the information I have submitted on this form is covered by the relevant Data Protection Act (please see paragraph below).** **I have enclosed, as confirmation of my child’s address, photocopies of:** **Tick**  Full name of parent or carer with parental responsibility:**Proof of Address (if you are moving you must provide evidence)****Child’s Passport (if applicable for Section E iii))**  Signature of parent or carer with parental responsibility:**Visa (if applicable for Section E iii))**  **If you do not provide the evidence required, this application form will be returned to you which will delay your application for a school place.** Date |

**PLEASE RETURN THIS FORM TO
THE SCHOOL ADMISSIONS SERVICE**

**If you have any questions about the application arrangements, please contact the School Admissions general enquiries line on:**

Tel: (01234) 718120

Fax: (01234) 228846

email: admissions@bedford.gov.uk

School Admissions Service

Borough Hall, Cauldwell Street

Bedford MK42 9AP

Under new Data Protection regulations (GDPR) Bedford Borough Council needs to inform you of the reasons why we are capturing your data and what we will do with your data. Any personal data collected and/or processed under this policy/procedure will be dealt with in accordance with Data Protection Legislation and the Council’s Data Protection Policy. Data is held securely and accessed by, and disclosed to individuals only where relevant to this policy/procedure. To find out more information on this follow the link below.

View the Council’s current Privacy Notices at [www.bedford.gov.uk/gdprprivacy](http://www.bedford.gov.uk/gdprprivacy)

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| ***SCHOOL******ADMISSIONS SERVICE*** |  |
| **IN-YEAR APPLICATION FOR CHURCH OF ENGLAND SCHOOLS ONLY****CONFIRMATION OF RELIGIOUS AFFILIATION** |
| If your application for a place at any of the following **Church of England** Schools is on **religious or faith grounds** you **must** make sure that your priest, minister or faith leader confirms, by signing the declaration below, that you meet the religious criterion applicable.You **must** refer to the school’s prospectus or website for details of the admissions criteria. **This is particularly important as these schools may have a variation to their religious criterion as a result of places of worship being closed during the Coronavirus pandemic.**

|  |  |  |
| --- | --- | --- |
| Christopher Reeves Primary | Great Barford Primary | Ravensden Primary |
| Riseley Primary | Roxton Primary | St Lawrence Primary |
| Wilden Primary |  |  |

 |
| School (see list above) |  |
| Pupil’s Surname |  |
| Pupil’s First name |  |
| Date of Birth |  |
| Address |  |

**Declaration by Priest, Minister or Faith Leader**

**I confirm that**

Name of parent(s) or adult(s) with parental responsibility:

**Is a member/practising member of the above congregation/place of worship and meets the criteria for admission to the following school(s):**

Name of School(s)

Name and address of priest, minister or faith leader Name of congregation/place of worship:

 Signature of priest/minister/faith leader:

Christian denomination or Religious faith: Date:

|  |  |
| --- | --- |
| ***SCHOOL ADMISSIONS SERVICE*** |  |
| **IN-YEAR APPLICATION FOR CATHOLIC SCHOOLS ONLY****CONFIRMATION OF RELIGIOUS AFFILIATION** |
| If your application is for a place at any of the following **Catholic** Schools is on religious grounds because your child had been baptised or enrolled in a catechumenate programme, you **must** provide their Baptismal Certificate or your priest **must** confirm enrolment in the programme. In addition if you are a practising Catholic family, your priest **must** confirm this, by signing the declaration below.If you are a member of another denomination or faith and you would like your child to attend a Catholic School on religious or faith grounds, your priest, minister or faith leader **must** sign the declaration below to support your application.You may wish to refer to the schools prospectus for the admissions criteria.

|  |  |  |
| --- | --- | --- |
| St John Rigby Primary  | St Joseph’s and St Gregory’s Primary | St Thomas More Secondary  |
|  |  |  |

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| School (see list above) |  |
| Pupil’s Surname |  |
| Pupil’s First name |  |
| Date of Birth |  |
| Address |  |

I attach a copy of my child’s baptismal certificate

**Declaration by Priest, Minister or Faith Leader**

I confirm that: **Please Tick**

The family of this child is a practising Catholic family

This child is not baptised but is enrolled in a catechumenate programme

I support this application

Name and address of priest, minister or faith leader: Name of congregation/place of worship:

Christian denomination or religious faith: Signature of priest/minister/faith leader:

Date: