

# Please remove this guidance sheet and keep it for your Information.

**Important:** You **MUST** read the information below before completing the attached application form.

## How we will process your **Primary** application

### Sandwell Community/Controlled Schools

A Community/Controlled School is one where the Local Authority (LA) has responsibility for admissions into the school. A list of all Sandwell schools can be found on our [website](#). To ensure that we consider applications for places fairly we will collect any applications received during a particular week and consider them against the pupil numbers which we receive at the end of that week. We will try to deal with an application for this type of school within **15** school days.

### Non Sandwell schools

**PLEASE DO NOT COMPLETE THIS FORM.** For schools outside Sandwell please contact the appropriate Local Authority for advice about their school admissions process.

### Sandwell Self Governing Schools

A Self Governing school is one where the Governing Body is responsible for admissions into the school. A list of Sandwell Self Governing schools is included overleaf. If you have applied for a school on the list we will forward your application to the school and it will be considered by the Governing Body. Once we are informed of the governors' decision we will write to inform you of the outcome. As it is not the LA that makes the decision an application for this type of school can take around **15-20** school days to process.

Parents should note that admission authorities cannot guarantee a place for any child at their preferred school

**Please note: we will not be able to process your request during a school holiday.**

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## **List of Sandwell self governing schools**

Albert Pritchard Infant	Springfield Primary
All Saints CE Primary	St Francis Xavier Catholic Primary
Brickhouse Primary	St Gregory's RC Primary
Christ Church CE Primary	Our Lady and St Huberts Catholic Primary
Corngreaves Primary	St John Bosco Catholic Primary
George Betts Primary	St John's C.E. Primary Academy
Harvills Hawthorn Primary	St Margaret's C.E. Primary
Holy Name RC Primary	St Mary's Catholic Primary
Holyhead Primary	St Matthew's Catholic Primary
Jubilee Park Primary	St Philip's Catholic Primary
Mesty Croft Academy	Tameside Primary
Moat Farm Junior Trust	Temple Meadow Primary
Moorlands Primary	The Priory Primary
Ocker Hill Junior	Timbertree Primary
Old Hill Primary	Victoria Park Primary Academy
Old Park Primary	Wednesbury Oak Primary
Park Hill Primary	Wood Green Junior Trust
Rowley Hall Primary	
Shireland Hall Primary Academy	
Silvertrees Academy	

## **Fair Access**

All LA's are required to have a "Fair Access" Protocol in place. This ensures that vulnerable, excluded or "Hard to Place" pupils are placed fairly and equitably across the schools in the LA. If your child meets the Fair Access criteria then your application might need to be considered by one of Our Fair Access Panels and so could take longer to process than normal

For Office Use Only:

On EMS	Application Number	SEN	Student ID	Application Date	CSS	HTP



## Request for a Primary School Place Mid-Year Transfer

### Sandwell schools ONLY

Before submitting this form you **MUST** ensure you read the attached information. Once you have completed pages 3 to 5, hand the form to your child's current school. If your child is not attending a school, please return the application form to;

**Admissions and Appeals, Sandwell Council House, PO Box 16230, Freeth Street, Oldbury. B69 9EX. Parent support line: 0121 569 6765**

**Please Note: If you leave any sections blank or provide misleading information this will delay the processing of your application.**

### Part 1 - To be completed by Parent/Carer

Please state (in order of preference) your preferred Sandwell school(s).

	School name	For office use only	
		DfE number	Status
1 <sup>st</sup> Preference			
2 <sup>nd</sup> Preference			

Child's First Name	Surname	Date of Birth	Year Group	Male/Female

Are any other names used by your child?  
If so please give details:

Name of adult with parental responsibility:  
(Mr / Mrs / Miss / etc)

Relationship to child:

Your Home Address, **proof required**  
(see page 5):

Contact Number:

Post Code:

Does your child live with you at this address?

Yes

No

If "No" please provide the address  
where your child lives:

Name of person child lives with:

Relationship to child:

Alternative Contact Number:  Work:

(If applicable)  Mobile:

E- Mail Address:

Is your application because of a change of address? Yes  No

Please provide your previous address and Date moved.

Is your child an asylum seeker/refugee? Yes  No

Please state when the child arrived in Britain. Please state month and year of entry and include a **copy of your child's [passport and visa]**. We may use this information to contact the UK Border Agency

Month  Year

Nationality (if not British):

Country of origin:

Is your child in public care? (Looked after by the Local Authority) Yes  No

Does your child have a brother or sister at any of your preferred schools? Yes  No

If so, please give details:  Name(s):

School:  Date of Birth:

Does your child have a statement of Special Educational Needs (SEN) or Educational Health Care Plan? Yes  No

Does your child have a disability? Yes  No

If yes, please state the nature of the disability:

Are you applying for a place on denominational (Religious) grounds? Yes  No

If so, please state religion:

Name of your child's current / last school (including name of Local Authority if not Sandwell):

Contact Number:

Is your child still attending this school regularly? Yes  No

If "No" please indicate last day attended:

Has your child had any exclusions from any school?  
If Yes, please provide brief details of the exclusions:

Yes  No

School:	Date of Exclusion(s):	Reason(s):
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Has your child's current school suggested you transfer your child? Yes  No

Please provide details of any contact you have had with your child's present/last school in order to resolve any difficulties:

If you have had contact with the school, please give the date of the last school meeting:

Did you attend: Yes  No

**Please ✓ the box which most accurately reflects your reason for transfer**

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| Bullying  | <input type="checkbox"/> | New to UK                | <input type="checkbox"/> |
| Curriculum Issues (including quality of teaching) | <input type="checkbox"/> | Returning to UK          | <input type="checkbox"/> |
| Denominational (Religious) Reasons                | <input type="checkbox"/> | New to Sandwell          | <input type="checkbox"/> |
| Distance from Home                                | <input type="checkbox"/> | Permanent Exclusion      | <input type="checkbox"/> |
| Domestic Problem                                  | <input type="checkbox"/> | Sibling at the School    | <input type="checkbox"/> |
| House Move within Sandwell                        | <input type="checkbox"/> | Traveller                | <input type="checkbox"/> |
| Issues with Other Parents                         | <input type="checkbox"/> | Armed Forces Family      | <input type="checkbox"/> |
| Other Provision                                   | <input type="checkbox"/> | Please state reason..... |                          |

***Information from this form will be used for the purposes of administering school admissions. All information is regarded as confidential and the personal data collected via this form may be processed or disclosed only within the limits of the current data protection notification.. For further information please contact Admissions and Appeals – 0121-569 6765.***

**Proof of your home address must be supplied with this form. Acceptable proof includes a Council tax bill, utility bill (water, gas, electricity with in the last 6 months), tenancy agreement or a mortgage statement. Please tick the box to confirm that proof has been provided.**

Signature of Parent/Guardian:

Date:

**If you are a non-EU citizen the information provided on this form together with any supporting documentation, is subject to verification by the Home Office. To be entitled to a state education in a UK school you must have a visa for the UK in excess of 6 months**

**\*Now Take This Form to Your Child's Present School**

\*If applicable

They **MUST** complete pages 6, 7 & 8.

## Part 2 - To be completed by your child's present school

**Note to School** – It is essential that all sections of this application are completed and returned to the address on the front of this form or emailed to the address on page 6 within 3 school days.

School Name:

Can you confirm that the information about the applicant is correct Yes  No

If no, please supply supporting evidence.

Unique Pupil Number Reference:

1. Please give any available information about the circumstances which have led to the parent's request.

2. Do you believe that a change of school would be in the best educational and social interests of the child?

Yes

No

3. Do you consider that this child is "Hard to Place" as set down in the Sandwell Fair Access Protocol?

Yes

No

(If yes, please complete Section 5)

4. Is the pupil on the Special Needs Code of Practice?

Yes

No

**SEN** Stage of Code of Practice

If School Action Plus please indicate if 'Behaviour or Learning'

5. For pupils designated as "Hard to Place" please attach the following (if applicable):

*Please tick if enclosed*

(a) Pupil incident log (including details of all fixed term exclusions in the last 12 months)

(b) IEP

(c) PSP

(d) BSP

- (e) Home/School Agreement
- (f) Risk Assessment
- (g) Attendance print out (please include print out for last full academic year as well as current year).
- (h) Details of other strategies used

**6. Intervention by other agencies.**

Please give details of any intervention by the following agencies:

<b>Agency</b>	<b>Details</b> (please include contact details if applicable)	<b>Additional Papers Attached</b> <i>(please list)</i>
Inclusion Support EP BST SENAT L		
CAMHS		
Social Care		
YOT		
EWS		
LACE		
Other (Please give details)		

7. Academic achievement/SATs Results

Subject	Grade/SATs Level

**Please attach student attendance record or any other additional information included in point 5.**

Signature:

Position

Date:

**Thank you very much for your co-operation.  
To enable the Local Authority to process this request without delay, please return by first class post to the address on page 3 or email to; [midyear\\_admissions@sandwell.gov.uk](mailto:midyear_admissions@sandwell.gov.uk)**

*The data entered onto this form can be used by the Council for the purpose of verifying electoral registration details.*