

IN-YEAR APPLICATION FORM – COMMUNITY SCHOOLS ONLY

This form is for parent(s)/carer(s) who wish to apply for a place in an existing year group at a school in Bath & North East Somerset.

Please complete one form for each child requiring a school place. All sections must be fully completed, additional delays may be incurred if there is any missing information. The Admissions Authority reserves the right to request further information and/or evidence at any time. **Please note that section 4** of the form needs to be completed by your child's current or most recent school attended so please plan for this. Failure to have this section completed may delay your child's application.

You **must not** use this form to apply for a change of school place if your child has an Education Health and Care Plan. Please contact the Special Educational Needs Team for guidance on the admissions process for your preferred school.

The school admissions website, which includes the In-Year application process, definitions and over subscription criteria for Community schools in Bath & North East Somerset can be found at [School Admissions](#)

Applications are normally processed within 10 school days of receiving a complete application and are processed in strict date order.

In Bath & North East Somerset we operate a Fair Access Protocol (FAP). Further details regarding the [FA Protocol](#) can be found on the authority's website.

FAPs are intended to act as a safety net for the most vulnerable. As such, they may only be used to place children that come under certain categories where a child is having difficulty in securing a school place in-year, and it can be demonstrated that reasonable measures have been taken to secure a place through the in-year admissions process. Only children without a school place will be regarded as fair access, that is; they are not on a school roll **and** meet the fair access criteria.

The information requested on your child in section 3 & 4 is used solely for the purpose of identifying if your child should be considered for a place using this protocol. It is not required for any other purpose and will not be used to make the decision whether to offer your child a school place under the In-Year scheme.

Section 4 of the application form can be left blank if your child is being home educated.

Applicants for children from outside of the UK, who are not Irish or UK citizens, will need to provide evidence of the [right to abode](#) in the UK, such as copies of the child's and applicant's passport and visa or settled/pre-settled status for EU citizens, to confirm they are entitled to receive a state funded education in England.

We recommend that foreign nationals, who wish to apply for a state-funded school place, to please check that they have a [right of abode](#) or that the conditions of their immigration status otherwise permit them to access a state-funded school. It is the responsibility of parents to check that their children have a right, under their visa entry conditions, to study at a school.

Please return your completed form by email or post. If you have any queries, please use the contact details below:

Email: admissions_transport@bathnes.gov.uk

Post: The Admissions & Transport Team, Bath & North East Somerset Council, Lewis House, Manvers Street, Bath, BA1 1JG. **Phone:** 01225 394312

SECTION 1 – Child Details: You should enter your child’s legal surname and first/middle name(s) as they appear on his/her birth certificate, unless the child’s name has been legally changed

First Name																														
Middle Name(s)																														
Last Name																														
Date of Birth	Day			Month			Year																							
Gender	Male or Female?																													
Home Address																														
																					Postcode									

Moving Address - Please complete this section only if you are moving address

You **WILL** need to provide documentary evidence of your new address for this to be considered. **In all cases, it is your responsibility to confirm that the LA has received the documentary evidence.** For further information refer to the Admissions Booklet which can be found at [School Admissions](#).

New Address																														
																					Postcode									
Date of Move	Day			Month			Year																							

Is this child currently on roll at a school?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, give name of current school			
If No, give name of previous school and last date on school roll:			
Is this child currently being home educated?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give date home education arrangement started & also, if appropriate, details of any previous school attended:			
Are you a UK service personnel (or crown service) family returning from overseas with a confirmed posting to the area? If Yes, please provide proof of your Posting to the area with the application.		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is this child currently living in the UK?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you have indicated No, is this child a British Citizen?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Or if you have indicated No and they are not a British Citizen, do they have the right to abode in the UK?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Is the child "looked after" by a Local Authority? (Sometimes referred to as "being in care")		Yes <input type="checkbox"/>	No <input type="checkbox"/>
A Looked After Child is a child who is in the care of a local authority or provided with accommodation by that local authority. If you are applying on behalf of such a child, please tick the YES box			
If YES, which Local Authority?			
Name & Contact Number for Social Worker			
Is the child a *Previously looked after child? i.e. immediately after being looked after became subject to an adoption, child arrangement or special guardianship order. Including Internationally Adopted Previously Looked After Children.		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If YES, please state under which category they fall within. Adoption <input type="checkbox"/> Care Arrangement order <input type="checkbox"/> Special Guardianship order <input type="checkbox"/> *Documentation will need to be provided as proof of care status. In all cases, it is your responsibility to confirm that the LA has received the documentary evidence.			

SECTION 2- Preferred School and Reasons for Preference			
When completing your preferred school if there is more than one school with the same name please also include the area in which the school is situated.			
My 1 st Preference school is:			
Date the place is required (Day/Month/Year)		In which Year group is the place required?	
Reasons for preference			

SIBLING Details – Complete if this child has a brother or sister at the school you are applying for.										
First Name										
Middle Name(s)										
Last Name										
Date of Birth	Day		Month		Year					
Gender	Male or Female?									
Home Address										
									Postcode	
Current School										

SECTION 3 - To be completed by Applicant

Has this child been permanently excluded from their current or previous school?

Yes No

If yes, is this their first permanent exclusion?

Yes No

Please give all dates of any permanent exclusions

Is this child attending the relevant age group for his/her age?

Yes No

If No which year group applies

Please use the space below to share any other information it would be useful for us to know

SECTION 4 – To be completed by the Head or another member of staff on their behalf of the current school

I confirm that the information provided by the applicant in Section 3 above is correct.

Yes No

School Name

Name of person completing this declaration

School Telephone Number & Email (if outside of B&NES)

Position in School

Signature

School Stamp:

SECTION 5 – APPLICANT DETAILS (details of adult responsible for applying for the school place)**Mr/Mrs/Ms/Miss****First Name****Last Name****Home Address****Postcode****Tel No. (daytime)****I would like to receive my offer of a school place via email:** Yes No

The outcome letter contains your child's name, address, date of birth and the offered school place (where relevant). By ticking this box, you are accepting full responsibility and liability for the council sending this information via unencrypted and unsecured email.

Email address**Relationship to pupil**

Mother Father Step Parent Foster Parent Social Worker
 Other Relative Other Family Member Other

Do you have legal parental responsibility for this child? If you do not have legal parental responsibility for the child, you must provide an accompanying letter from a person with legal parental responsibility granting you the authority to make the application on their behalf.

Yes No **SECTION 6 – DECLARATION - PLEASE SIGN AND DATE THIS FORM BELOW**

I understand that by signing this declaration I certify that the information I have given on this form is correct to the best of my knowledge and belief. I accept that any place offered may be withdrawn by the LA even after my child has started school if it has been established that the place was offered on a basis of false or misleading information.

General Data Protection Regulation 2018

The information that you give on this form will be used for the purpose of processing your application for a school place & school transport where appropriate for your child. The information may be shared with schools, the Department of Education, and where relevant and pertinent to your application, diocesan bodies, appeal panels and other Council Departments, LAs and schools outside of this area for the purposes of verifying the accuracy of the application. It will not be used for any other purpose unless required to do so by law.

I have read the explanatory notes which accompany this form, and the Admissions Booklet.

I agree that if my child meets the FA Protocol that the information provided relating to my school application can be shared with the Area Behaviour & Attendance Partnership Panel.

If there is joint responsibility, this application must be discussed with everyone who has parental responsibility and 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.

Signature**Date**