

School application for children in reception to year 11 at schools and academies maintained by Manchester City Council

If you have any questions regarding this form please read the attached notes of guidance. If you still have questions you can contact the Integrated Admissions Team by:

Phone: 0161 245 7166 **Email:** school.admissions@manchester.gov.uk **Web:** www.manchester.gov.uk/admissions

Please Note

- Section D must be completed by your child's current school/academy. Any incomplete forms will be returned to the parent/carer.
- If you are new to the UK please complete sections A, B and C only. You will need to provide a form of identification to clarify your child's date of birth, e.g. A photocopy of a birth certificate/home office ID card.
- This form must be completed using BLOCK CAPITALS.

Section A. Child details

Child's Surname:	Child's Forename:	Date of birth:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Circle as appropriate

Gender:	Male	Female	Is the child new to the UK?	Yes	No	Baptised Catholic:	Yes	No
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Is the child currently or previously a looked after child?*	Yes	No
Is the child subject to a private fostering arrangement?*	Yes	No
*Please see the Notes of Guidance for further information on these questions.		

Home address: this must be the child's normal place of residence
<input type="text"/>
Postcode:
<input type="text"/>

Section B. School/academy details

Name of requested school/academy: <i>We would advise you name at least 3 schools/academies. You can name more if you wish.</i>	1.
	2.
	3.

Reason for requesting a new school/academy (continue on a separate sheet if necessary)
<input type="text"/>

Do you have another child already attending the preferred school/academy? If yes, please enter their details below.			
Surname:	Forename:	Date of birth:	Relationship to applicant:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section C. Parent/Carer details

Parent/carers Surname:	Parent/carers Forename:	Relationship to child:
Email address:	Home telephone number:	Mobile telephone number:

Please inform us if any other agencies are involved with the child, e.g. Social services, educational psychologists, youth offending team, etc. Continue on a separate sheet if necessary

Agency:	Named contact:	Contact telephone number:

I declare that all the information I have provided is true. I understand that any school place offered on the basis of fraudulent or intentionally misleading information will be withdrawn. I consent to the information given on this form being shared with appropriate agencies.

Signed:		Date:	
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Section D. Current school/academy information (Leave this section blank if the child is new to the UK)

To be discussed with and completed by the headteacher/principal of the current school/academy. If questions 4-11 are answered yes or question 12 answered no, the headteacher should attach further information.

1. Name of current School/Academy			
2. How long has the pupil attended your school/academy?			
3. Is the pupil still attending?	Yes	No –Date Last Attended:	
4. Does the pupil have a statement of special educational needs?	Yes	No	
5. Does the pupil have a current pastoral support plan in place, parenting contract or order for behaviour or attendance?	Yes	No	
6. Is the pupil subject to a child protection plan?	Yes	No	
7. Does the pupil have a common assessment framework (CAF) in place?	Yes	No	
8. Has the pupil been permanently excluded from two or more schools?	Yes	No	
9. Has the pupil attended a Pupil Referral Unit (PRU) during the last 12 months?	Yes	No	
10. Has the pupil resided within a local authority secure children's unit within the last 6 months?	Yes	No	
11. Has the pupil received any fixed term exclusions in the past 12 months? If yes please give details	Yes	No	
12. Do you support the parent's request to transfer their child?	Yes	No	

Headteacher/nominated representative signature:	Position:	School/Academy stamp:
Print name:	Date:	
Contact Number:	Additional Information Attached?	
	Yes – Pages:	No

Please return this form by post:

Integrated Admissions
Manchester City Council
P.O. Box 532
Town Hall Extension
Manchester
M60 2LA

or in person:

Customer Contact Centre
Manchester Contact Centre
Town Hall Extension
Albert Square
Manchester
M60 2LA