**School Admissions**

**Application for**

**a school place for 2024**

This application form is for parents and carers with parental responsibility who live within Central Bedfordshire and would like to apply for a place in September 2024 for one of the following admission rounds:

* Transfer to Upper 2023 - **Closing date 31 October 2023**
* Transfer to Secondary 2023 - **Closing date 31 October 2023**
* Transfer to Middle 2023 - **Closing date 15 January 2024**
* Starting School 2023 - **Closing date 15 January 2024**

**The closing dates are nationally set by the Department for Education and apply to all Admissions Teams throughout the country.**

Before you apply, please read carefully the ‘Admissions in Central Bedfordshire 2024’ booklet, available at **www.centralbedfordshire.gov.uk/admissions**

If you live in another local authority do not complete this form. You must complete your home local authority’s application form and return it to them.

**You must complete one form per child**

**Send completed forms to:**

admissions@centralbedfordshire.gov.uk

**Important things to consider before applying**

* **Make sure your application reaches us by the national closing date!**

All applications we receive after the national closing date will be classed as late and not processed until the late allocation round, which will take place after the national offer day for on time applications. Late applications are not dealt with until after all the on-time applications have been considered. Places are not reserved at schools in the on-time allocation for late catchment children or any other circumstances.

* Submitting a late application significantly reduces your child’s chance of an offer of a place at one of your preferred schools.
* Living in the catchment area may give your child priority however it does not automatically guarantee a place at your local school.
* If you live outside the catchment area and have an older child at the school, we cannot guarantee your younger child will be offered a place at the same school.
* You will find out where your child has been offered a school place on:
* Transfer to Upper/Secondary**1 March 2024**
* Starting School/ Transfer to Middle **16 April 2024**
* If a place cannot be offered at your preferred school(s), the Council will offer a place at your next nearest school with available places.
* All the information you may need to make your application is available on our website [www.centralbedfordshire.gov.uk/admissions](http://www.centralbedfordshire.gov.uk/admissions) or by emailing the School Admissions Team admissions@centralbedfordshire.gov.uk

**For Starting School 2024 applications only**

* **You must include proof of your child’s date of birth, with your application. Please send a copy of your child’s passport or short birth certificate to the school Admissions Team when you make your application. Please apply using the name as it appears on your child’s birth certificate.**
* Even if your child attends a nursery or preschool on the school site, you must still make a Starting School 2024 application to the School Admissions Team as there is no automatic transfer to Reception Year**.** Having a place at the nursery or preschool does not guarantee your child a place in Reception Year.

**Contact us**

Email: admissions@centralbedfordshire.gov.uk

Telephone: 0300 300 8037

**Application for a school place for 2024**

**Please use the name of your child as it appears on the Birth Certificate or Legal Deed Poll**

**Child’s surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child’s first name (s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender at birth: Male Female**

**Child’s primary home address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of current school/nursery \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date admitted\_\_\_\_\_\_\_\_\_**

**Application – please specify which admission round you are applying for:**

**Transfer to Upper School 2024** (children currently in Year 8)

 **Transfer to Secondary School 2024** (children currently in Year 6)

 **Transfer to Middle School 2024** (children currently in Year 4)

 **Starting School 2024** (children born between 01/09/19 and 31/08/20)

**School preferences**

You may state up to three preference schools

**1st preference school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2nd preference school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3rd preference school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

It is important to consider how your child will travel to school before submitting your application. You should check the Council’s Home to School Transport policy to find out whether they will be entitled to free home to school transport to your preferred school(s) when considering which school(s) to apply for. Information is available at [www.centralbedfordshire.gov.uk/schooltransport](http://www.centralbedfordshire.gov.uk/schooltransport) or you can contact the School Transport Team on 0300 300 8339

|  |
| --- |
| **For Office Use Only** |
| Date Received | Catchment School | 1st Pref Criterion | 2nd Pref Criterion | 3rd Pref Criterion | Logged  | Checked |
|  |  |  |  |  |  |  |

**Name of parent/carer with parental responsibility**

**Title: Ms / Mr / Mrs / Miss / Dr / Other\_\_\_\_\_\_\_\_\_\_\_**

**Forename \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home tel number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Tel number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address (if different from child)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

2nd parent / carer (if applicable)

**Name of parent/carer with parental responsibility**

**Title: Ms / Mr / Mrs / Miss / Dr / Other\_\_\_\_\_\_\_\_\_\_\_**

**Forename \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home tel number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile tel number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address (if different from child) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

We will only communicate with applicants with parental responsibility named on this application. If only one parent/carer is named we can only speak to this person about the application in the first instance.

**Siblings**

If you have an older child who will be attending one of the schools you have stated in September 2024 please give details below

**Sibling name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_**

**School attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current year group \_\_\_\_\_\_\_\_**

**Address if different \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other information**

**Yes**

**Does your child have an Education, Health and Care Plan?**

**(This is a 20-week process and it is a plan that is issued by the Local Authority, not the school).**

**Yes**

**Is your child a ‘looked after’ or previously ‘looked after’ child?**

**i.e in care of the Local Authority**

**No**

**If yes which Local Authority is/was responsible for the child?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If yes, can you please provide one of the following documents:**

* **Adoption birth certificate**
* **Residence order**
* **Special guardianship order**

**Please submit this supporting document(s) with your application.**

**Is your Child subject to a Court Order or a Specific Issue Order Yes** ****

 **No **

**If yes, please provide a copy of the Court Order or Specific Issue Order at the time you submit your application for transfer 2024**

**Is the child’s parent / carer a member of the UK armed forces? If yes, please provide us a copy of your posting / assignment order. Yes **

 **No **

**Does your child have a ‘very exceptional medical reason why they should be given priority of admission to one of the schools you have listed?**

**Yes**

 ****

**No**

 ****

Please note this criterion does not apply to all schools/academies

**Is your child eligible for Early Years Pupil Premium (EYPP), **

**Yes**

**Pupil Premium (PP) or Service Premium (SP)**

**No**

 ****

**If yes which?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please note this only applies for Eaton Bray Academy, Meppershall CofE Academy, St. Augustine’s Academy, St. Mary’s CofE VA Lower (Clophill) and Sutton CofE VA Lower.

**If you are a staff member at any of the schools’ you have selected, which give priority to children of staff please give details below:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please use this box for any additional information to support your application but please be aware that we can only use it in support of the criteria for the school/s you have indicated.**

**Please note any offer made will be withdrawn if we find that the parent(s)/carer(s) have given false information.**

**Declaration**

Please read this declaration carefully before you sign it:

* **I/we declare that the information given on this form is correct and that I/we have read and understood the ‘Admissions in Central Bedfordshire 2024’ booklet and the way in which places are allocated.**
* **I/we understand that if I/we knowingly give information that is incorrect or misleading that I/we may be liable for legal action and the withdrawal of any offer of a school place**
* **I/we agree to provide School Admissions with information regarding my/our child’s address, upon request, as part of the verification process.**
* **I/We have parental responsibility for the named child and this is the only application form I/we have completed.**
* **I/We will advise School Admissions, in writing, of any changes to the information on this form.**
* **I/we understand that the information I/we have submitted on this form is covered by the Data Protection Act 2018 (please see paragraph below)**

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of parent(s) or carer(s) with parental responsibility:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Data Protection**

We will hold the personal details supplied on the application form for the purposes of processing your application for a school place. We will share the information with other relevant teams within the Council, other Local Authority Admissions Teams and schools where necessary. We will safeguard your personal details and these will not be divulged to any individuals or organisations for any other purposes.

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**Confirmation of religious affiliation – Church of England Schools**

**CENTRAL BEDFORDSHIRE SCHOOLS ONLY**

Please complete this form if you are applying for the any of the following schools **on religious/faith grounds:**

Manshead CE Academy, Edward Peake CofE VC Middle, Henlow CofE Academy, Holywell School, Ashton St. Peter’s CofE VA Primary, Clifton All Saints Academy, Dunton CofE VC Lower, John Donne CofE VA Primary School, Meppershall CofE Academy, Northill CofE VA Lower, Pulford CofE VA Lower, St. Andrew’s CofE VC Lower (both East and West), St. Leonard’s VA Lower, St. Mary’s CofE Academy, St. Mary’s Cofe VA Lower (Clophill), Sutton CofE VA Lower, Thomas Whitehead CE Academy, Wrestlingworth CofE VC Lower

**If you are applying for more than one school, please complete a separate form for each school**

**To be completed by the parent/carer:**

Child’s surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth\_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be completed by Priest, Minister or Faith Leader:**

I can confirm that (name(s) of parent/carer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is/are a member/practising member of the following congregation/place of worship and meets the criteria for admission to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of school/s)

Name of priest/minister/faith leader\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of congregation/place of worship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Christian denomination or religious faith \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of priest/minister/faith leader\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email it to:** **admissions@centralbedfordshire.gov.uk**

**Confirmation of religious affiliation – Catholic Schools**

**CENTRAL BEDFORDSHIRE SCHOOLS ONLY**

Please complete this form if you are applying for the any of the

following schools **on religious/faith grounds:**

St. Mary’s Catholic Primary, St. Vincent’s Catholic Primary

**If you are applying for both schools, please complete a separate form for each school**

If your application for a place at the above Catholic primary schools is on religious grounds because your child has been baptised or enrolled in a catechumenate programme you must provide a copy of their baptismal certificate, or your priest must confirm enrolment in the programme.

**To be completed by the parent/carer:**

Child’s surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth\_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have attached a copy of my child’s baptismal certification: Yes No

**To be completed by Priest, Minister or Faith Leader:**

I can confirm that (name(s) of parent/carer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The family of this child is a practising Catholic family

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

I support this application

Name of priest/minister/faith leader\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of congregation/place of worship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Christian denomination or religious faith \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of priest/minister/faith leader\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email it to:** **admissions@centralbedfordshire.gov.uk**