

Wigan Council Secondary school transfer of school - Application form

Part 1

This form must be completed and signed by the Head Teacher in the school that your child currently attends/attended. Once completed it must be returned together with part 2 of the application form.

Parent/Carers must not complete this section

For school to complete:

Once this form has been completed and signed by the head teacher, the parent/carer will submit the form to the School Organisation Team. The school must send the relevant documents listed below to the School Organisation Team at secondaryinyeartransfers@wigan.gov.uk

Schools must also share this information with parent/carer on request.

- 1. Attendance information
- 2. Behaviour conduct log
- 3. Fixed term exclusion record
- 4. Educational Health and Care Place (if applicable)
- 5. Copy of last school report

Please answer all questions fully and indicate 'not applicable' where appropriate.

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Name of Pupil:	NCY:	UPN:
Name of parents/carers (those with parental resp	oonsibility):	
Address:		
Telephone number:		
Ethnicity:	Language spo	oken:
Current School and DfE Number:		
Current School and DIE Number.		



Special Educational Needs and Medical information	
Educational Health and Care Plan (EHCP) Status:	
Date of last EHCP meeting: Date of last review:	
Are you aware of additional need in any of these areas? Please indicate 'Yes' or 'No' and comment	
Hearing:	
Vision:	
Speech and language:	
Specific learning difficulties:	
Autistic Spectrum Disorder:	
Attention Deficit Hyperactivity Disorder:	
Other (please specify):	
Owner and Oarrice a level become and	
Support Services Involvement Please indicate and give the contact name and dates of intervention(s)	
Targeted Education Support Service (TESS):	
Child and Adolescent Mental Health Service (CAMHS):	
Education Psychology Service (EPS):	
Targeted Youth Support Service (TYSS):	
Engagement Centre:	
Attendance Services:	
Start Well:	
Social Care:	
Special Educational Needs and Disability Service (SEND):	
Speech and Language Team (SALT):	
Occupational Therapy (OT):	
Virtual School Team (VST):	



Special Educational Needs and Disability Information Advice and Support Service (SENDIASS):
Special Educational Needs and Disability Information Advice and Support Service (SENDIASS).
Paediatrician:
Alternative Provision:
Wellbeing Centres – Early Years:
,
Ethnic Minority & Traveller Achievement Service (EMTAS):
Learning Profile
Most recent progress data and any additional profiling:
Behaviour Profile How does the child behave in school?
How does the child behave in school?
Does the child exhibit any inappropriate behaviour in school? <i>If yes, please comment</i>
boos the office exhibit any mappropriate behaviour in school: If yes, please comment
What Behaviour strategies has the schools used? (if applicable)
What Behaviour endlegies has the series assure (ii applicable)
Has the child had any fixed term suspensions in the last 12 months?
Risk to self or others? (please attach risk assessment if appropriate)
Emotional/Social Profile
Self esteem:
Ability to reflect on own behaviour:
Communication/co-operation skills:
Academic Attainment information for child
Key Stage Assessments Key Stage 1 Teacher Assessment Key Stage 2 SATs
English Rey Stage 1 Teacher Assessment Rey Stage 2 SATS
Mathematics

Science



Subject	Qualification	Exam Board	Subject	Qualification	Exam Board
	GCSE/NVQ/BTEC	e.g. AQA		GCSE/NVQ/BTEC	e.g. AQA
	and predicted grade			and predicted grade	
	grade			grade	
Discounting	-l-4-:l f ll				•
				ement the child is attend	ing or any
aiternative e	ducation which has bee	n agreed (includ	ing contact na	mes):	
This form r	nust only be signed	by the Head 1	- Teacher		
			Teacher		
A meeting wi	ith the parents/carers to	ok place on:			
A meeting wi		ok place on:		olease explain below	
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