

# Wigan Council Secondary school transfer of school - Application form

# **Important Information**

Before applying you must read the 'In-Year Admissions - Primary and Secondary Schools Information Booklet' which is available online at <a href="https://www.wigan.gov.uk">www.wigan.gov.uk</a> by following the links for Education – School Admissions – Moving School. If you cannot read the booklet online, please contact us on 01942 489013.

## How do I apply?

Wigan Council is responsible for co-ordinating admissions into all secondary schools in the Wigan area except for Fred Longworth High School\*.

- Parent/carer wishing to change their child's school from one school to another school within the Wigan Borough
- Parent/carer who have arrived into the Wigan Borough requiring a school place for their child
- · Parent/carer wishing to move from an independent school to a school maintained by the council

## Is there an application form I need to complete?

This is the application form that the parents/carers will be required to complete when requesting admission to a new school. There are two parts to the application form, Part 1 should be completed by the Head Teacher of your child's current school, Part 2 must be completed by the parent/carer with parental responsibility.

You must ensure your child's continued attendance at their current school whilst your application is being considered, however it is recognised that for families who have moved into Wigan this may not always be possible. You must in all circumstances inform the Head Teacher at their previous school of the arrangements you are making. They will need to fill in part 1 of the application form before you can submit your application.

#### Children with an Educational Health and Care Plan (EHCP)

In-year applications for such children are considered separately. Where your child has an Education, Health and Care Plan, please complete the application form. If you are new to the area, it is important to tell the local authority where you are coming from that you are moving to Wigan. This will allow them to send your child's details to the Wigan Special Education Needs (SEND) team.

#### Please return your completed form, that is both parts 1 and 2 to:

Secondaryinyeartransfers@wigan.gov.uk

Or

School Organisation Team Wigan Council PO Box 100 WN1 3DS



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# 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 <a href="mailto:secondaryinyeartransfers@wigan.gov.uk">secondaryinyeartransfers@wigan.gov.uk</a>

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	onsihility):	
Traine of paremersarers (mose with paremarres)	5011010111ty ).	
Address:		
Tolonhono numbor:		
Telephone number:		
Ethnicity:	Language spo	oken:
Compant Cabaal and DfF Novabar		
Current School and DfE Number:		



Special Educational Needs and Medical information		
Education, 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 Please indicate 'Yes' or 'No' and comment	areas?	
Hearing:		
Vision:		
Speech and language:		
Specific learning difficulties:		
Autistic Spectrum Disorder:		
Attention Deficit Hyperactivity Disorder:		
Other (please specify):		
Support Services Involvement Please indicate and give the contact name and dates	of intervention(s)	
	of intervention(s)	
Please indicate and give the contact name and dates		
Please indicate and give the contact name and dates  Targeted Education Support Service (TESS):		
Please indicate and give the contact name and dates  Targeted Education Support Service (TESS):  Child and Adolescent Mental Health Service (CAMHS)		
Please indicate and give the contact name and dates  Targeted Education Support Service (TESS):  Child and Adolescent Mental Health Service (CAMHS  Education Psychology Service (EPS):		
Please indicate and give the contact name and dates  Targeted Education Support Service (TESS):  Child and Adolescent Mental Health Service (CAMHS  Education Psychology Service (EPS):  Targeted Youth Support Service (TYSS):		
Please indicate and give the contact name and dates  Targeted Education Support Service (TESS):  Child and Adolescent Mental Health Service (CAMHS  Education Psychology Service (EPS):  Targeted Youth Support Service (TYSS):  Engagement Centre:		
Please indicate and give the contact name and dates 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:		
Please indicate and give the contact name and dates 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:	3):	
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Please indicate and give the contact name and dates 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 (SE	3):	



		Coun		
Special Educational Nee	ds and Disability Information Advice a	and Support Service (SENDIASS):		
Paediatrician:				
Alternative Provision:	Alternative Provision:			
Wellbeing Centres – Earl	y Years:			
Ethnic Minority & Travelle	er Achievement Service (EMTAS):			
Learning Profile				
Most recent progress dat	a and any additional profiling:			
Behaviour Profile				
How does the child beha	ve in school?			
Does the child exhibit an	y inappropriate behaviour in school?	If yes, please comment		
	, , , , ,			
What Behaviour strategie	es has the schools used? (if applicab	le)		
(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 Pro	file			
Self esteem:				
Ability to reflect on own b	ehaviour:			
Communication/co-operation skills:				
Academic Attainment	information for child			
Key Stage Assessments				
	Key Stage 1 Teacher Assessment	Key Stage 2 SATs		
English				
Mathematics				
Science				



Curriculum Options					
	hich GCSE/NVQ opti			1	1
Subject	Qualification	Exam Board	Subject	Qualification	Exam Board
	GCSE/NVQ/BTEC	e.g. AQA		GCSE/NVQ/BTEC	e.g. AQA
	and predicted			and predicted	
	grade			grade	
Please give det	ails of any college co	ourse or work exp	perience placem	ent the child is attend	ing or any
alternative educ	cation which has bee	n agreed (includi	ing contact name	es):	
		• ,		,	
This form must only be signed by the Head Teacher					
A meeting with the parents/carers took place on:					
Are you aware of the parent's reasons for changing school? If so please explain below					
I agree with this application for transfer of school YES / NO					
Signed: (Head Teacher)					
Olynea. (Ficad Teacher)					
Head Teacher:					
School:			Date:		
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# Wigan Council Secondary school transfer of school - Application form

# Part 2

This form must be completed by parents/carers seeking admission to a Wigan Secondary School.

There are <u>two stages</u> to the process, and you need to fully complete all sections of this form to prevent delay. Incomplete forms may be returned.

Details of Child:			
Child's first name:	Child's surname:		
Date of birth:	Gender:		
Child's home address This must be the child's normal place of residence			
Current address:	<del>56</del>		
Date moved into this home:			
Previous address: (if you are moving schools because	se of a change of add	lress or you have moved within	
the last 12 months)		•	
,			
Current School name and address:			
If not currently at a school please put the last school	and date attended:		
Name and address of last school:			
Name and address of last school.			
To be completed only if you are moving house			
Documentary proof may be required.			
New address:		Date of move:	
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About your child			
Is your child a new arrival in the Un (UK)? YES / NO	ited Kingdom	Date of arrival in	the UK:
What is the main language you spe	ak in your home?		
Which country did your child liv in b	efore coming to the	he UK?	
Has your child attended any school	in the UK previou	usly? If so please	orovide:
Name of School:			
Address of School:			
Date last attended:			
Does your child have an Education	al Health and Car	e Plan (EHCP)?	YES / NO
If yes, you must contact the SEND			
Is your child Looked After by a Loca	al Authority (often	known as 'In Care	e) ? YES / NO
If yes, which local authority:			
Was your child previously looked at	ter?		YES / NO
Was your child adopted from state care outside of England?  YES / NO			
If yes to the above questions, you vapplication (please send photocopic	-	e evidence to sup	port this. Submit this with your
Adoption Order:	Residence Orde	r:	Special Guardianship Order:
			VEC (NO
Is your child in a formal kinship care arrangements?  YES / NO			
If yes, please provide further details:			
Does your child have a social worker? (please provide their name and telephone number)			
If your child has started any GCSE course, please list subjects below: (Please continue on an additional sheet if necessary)			
Subject		E/BTEC	Exam Board e.g. AQA
•			



Reason for your transfer request Why are you applying to transfer school? Please select:		
Moving house within the borough		
Moved into the borough		
Recently moved to the UK		
Brother and sisters at preferred school (please provide their name/date of birth)		
Advised to move by current school		
Unresolved issues with current school (please provide more information)		
Distance to travel (only complete if you have moved house)		
Other (please provide more information		
Has your child been suspended from school, or suspended for a fixed period within the last two years? If yes, please indicate which school(s) and what date(s) they were suspended.		
Do you think your child is at risk of permanent exclusion? YES / NO		
If yes, please explain why:		
Your decision to change schools <b>must</b> be discussed with your child's current school. Have this happened? YES / NO		
What was the outcome of this discussion and who did you speak to?		



School Preference			
Please state three different schools that you would consider for transfer in order of preference, and reasons for the preference:			
1.			
2.			
3.			
Why do you feel that one of the above preferences would be better for your child? (Please continue on a separate sheet if necessary).			
Is there anything else you would like to make us aware of which may be relevant to your application?			



D	- Court		
Parent/Carer Details			
Title: Mr / Mrs / Miss / Dr / Other	Cumama		
First Name:	Surname:		
Contact number:	Email Address:		
Disalaiman			
Disclaimer	ith average who have perental recognicity for		
Before submitting an application you <b>must</b> consult with everyone who have parental responsibility for your child. If there is a Court Order in place which prevents moving your child's school, you must take legal advice on that order before submitting an application to transfer school.			
I confirm that there is no Court Order in place which with parental responsibility have been consulted and			
Yes, all agree			
No, all do not agree (submitting a form without	ut agreement will cause delays)		
The information provided on this form will be processed in accordance with the Local Authority's School Admissions and Appeals Service Privacy Notice. Information will be treated as confidential and will be used only for the purpose of processing your child's application for a school place in accordance with the School Admissions Code 2021.			
The Privacy Notice is in line with our duties as set out in the Data Protection Act 2018 and GDPR. The legislation gives rights to those individuals whose data is held.			
<ul> <li>These include:</li> <li>The right to request access to the data that is being held by contacting the Council Data Protection Officer – dataproctectionofficer@wigan.gov.uk</li> <li>The right to request the reason why the data is being held and what it is being used for.</li> <li>The right to request data to be removed (although without the information, your application for a school place cannot be processed).</li> <li>The right to request the Local Authority to correct or amend any incorrect information.</li> <li>The right to know who the data may be shared with.</li> <li>The right to know how long the data can be held before it is destroyed.</li> </ul>			
A copy of the full Privacy Notice is available by visiting <u>www.wigan.gov.uk</u>			
By signing this declaration, you are declaring that you have read and understood the terms of the notice.			
I confirm that I have parental responsibility and/or care of the child, and that the child lives with me.			
My child is eligible to a free education in the UK?	YES / NO		
My relationship to the child is:			
Name of Applicant:			
Signature:	Date:		
Have you had any assistance in completing this form	n? YES / NO		
If yes, please state from whom			