

**APPLICATION FOR TRANSFER BETWEEN SCHOOLS**

Where more than one person has parental responsibility for a child, the person completing this application is asked to agree the preferred school with others with parental responsibility, where their whereabouts are known, before submitting this form.

Please note that your child's admission to school may be delayed if your application contains serious errors or omissions or fails to disclose relevant information.

If this is a first application for a place in a Pembrokeshire maintained school please enclose a copy of your child's full birth certificate.

We advise parents to read the **Information for Parents Booklet** available on the County Council Website, in schools or contact the Admissions Officer for a copy.

<b>Childs Legal Surname</b>				For office use	
<b>Legal Forenames</b>					
<b>Other known as name</b>					
<b>Date of Birth</b>		<b>Gender</b>		Multiple birth	
<b>Birth Certificate</b>	Please include a copy of your child's full birth certificate if this is a first application to a Pembrokeshire maintained school				
<b>Address of child</b>					
		<b>Postcode</b>			
<b>Parent/Guardian 1</b>		<b>Relationship</b>			
<b>Parent/Guardian 2</b>		<b>Relationship</b>			
<b>Parents address</b> (if different from the child)					
<b>Home Telephone</b>		<b>Mobile 1</b>			
<b>Work Telephone</b>		<b>Mobile 2</b>			
<b>Email 1</b>					
<b>Email 2</b>					
<b>Preference 1</b>		<b>Language choice (please √)</b>			Catchment
<b>Name of School</b>		English	Welsh		
<b>Full-time place</b>	<b>Start of term</b>		<b>Year</b>		
<b>Do any siblings attend this school?</b>	<b>Name(s)</b>	<b>d.o.b.</b>			
<b>Preference 2 (if required)</b>		<b>Language choice (please √)</b>		Catchment	
<b>Name of School</b>		English	Welsh		
<b>Full-time plate</b>	<b>Start of term</b>		<b>Year</b>		
<b>Do any siblings attend this school?</b>	<b>Name(s)</b>	<b>d.o.b.</b>			
<b>Current School</b>		<b>Year Group</b>		Acknowledged	
<b>Local Authority (if not Pembrokeshire)</b>				On system	

<b>Is this request because of a house move?</b>	<b>Yes</b>		<b>No</b>		<b>Date of move</b>	
<b>If Yes - have you already moved?</b>	<b>Yes</b>		<b>No</b>		<b>Date of move</b>	
If <b>No</b> - please give child's New address						
If <b>Yes</b> - please give child's previous address						

**Reasons for preference** (you may continue on a separate sheet if necessary)

---



---



---

<b>Does your child have a statement of Special Educational Needs?</b>	<b>Yes</b>		<b>No</b>		SEN
Local Authority					
Contact Name					
Telephone number					

<b>Is the child currently or previously 'looked after' (ie in the care of social services)?</b>	<b>Yes</b>		<b>No</b>		LAC
Social Worker					
Local Authority					
Telephone number					
If previously looked after, please provide further information and copies of supporting documentation if applicable.					

<b>Is the child subject to an order of the court?</b>	<b>Yes</b>		<b>No</b>	
---	------------	--	-----------	--

I understand I have the right to express a preference for the school where I wish the above child to be admitted  
 I have read and understood the published criteria relating to school admissions  
 I understand that if preference is expressed for a school other than the catchment school I will be responsible for home to school transport and all costs relating to it  
 I understand that a place may be lawfully withdrawn if the information given on this form is fraudulent or misleading and that steps will be taken to confirm that the correct address has been used  
 I confirm that I am the parent/legal guardian holding parental responsibility for the child concerned and that all of the information included on the application form is true to the best of my knowledge and that all others with parental responsibility, where their whereabouts are known, have agreed to this application  
 I understand that the information I have given on this form is to be held by the Council subject to the provisions of the Data Protection Act 1998 and the information on this form will be used for the administration of school admissions or transfers, School Transport, Free School Meals Service, Social Services, School Health Service (including Child Health & School Nurses) and other council departments for statistical monitoring purposes only

Signature of parent/guardian \_\_\_\_\_

Printed name of parent/guardian \_\_\_\_\_

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

Date \_\_\_\_\_

Proof of your address may be required, random checks are made for audit purposes	<b>Return this form to:</b> The Admissions Officer Education Services Pembrokeshire County Council County Hall Haverfordwest SA61 1TP
Include copies of any documentary evidence as required ie: Child's full birth certificate, proof of address The Admissions Authority reserves the right to seek further documentary evidence as it feels appropriate.	