City of Stoke-on-Trent	Children and Family Services In-Year Transfer Request Form Academic Year 2023-24		
<b>do not</b> comple 01782 231863.	I have an Education Health and Care Plan? If <b>YES</b> , please ete this form – call the Statutory Assessment Team on care? If <b>YES</b> , please <b>do not</b> complete this form – ask	Can a place be offered?  YES NO  Is proof of address attached?  YES NO	
the Social Worl 237856.	ker to contact the In-Year Admissions Team on 01782	Has proof of address been requested? YES NO	

## Section 1 – Name of School applying for St George & St Martin Catholic Academy

We advise that you obtain and read a copy of the School's Admission Policy

- If you are applying for a Religious School/Academy, you will need to complete a Supplementary Information Form. This can be obtained directly from the school.
- If you are applying for a Catholic School/Academy and your child is Baptised, a copy of the Baptism Certificate must be enclosed with this application.
- If a Baptismal Certificate or Supplementary Information Form is not supplied, the outcome of your application may be affected.

Section 2 – C	Section 2 – Child's Details								
Has your child previously been in the care of a Local Authority but has now been adopted or is subject to a Child Arrangement Order/Residence/Special Guardianship Order?									
Yes:		No:		If YES, you	<b>MUST</b> a	ttach eviden	ice of th	is	
Child's First Na (Print Name in Block Capitals)	ame:								
Child's Surnam (Print Name in Block Capitals)	ne:								
Date of Birth:		,	/ /			Year Gro	oup:		
Male:		Female	: [						

## Section 3 - Details of Parent/Guardian completing this form Do you have parental responsibility for this child? Yes: No: What is your relationship to this child? Mother: Father: If other\*, you must provide legal documents which show you have Other \* (please state relationship): **Parental Responsibility** Parent/Guardian: Mr/Mrs Miss: (Print Name in Block Capitals) Parent/Guardian: Mr/Mrs Miss: (Print Name in Block Capitals) Child's Home Address: Post Code: Phone: (Mobile) Home/Work: E-mail address: If you will be moving address, please state your new address below and the expected date of your move. If possible, please enclose a copy of official documentation e.g. Solicitor/Landlord letter, as proof that you will be living there. New address: Post Code: NB: it is your responsibility to advise The Admissions and Transport Team immediately if these details change. Please email Expected move date: in-yearadmissions@stoke.gov.uk Section 4 - Details of school age brothers/sisters Name of Brother or Sister **School Attending Date of Birth Year Group** /

Section 5 – Reason for changing school – To be completed by Parent/Guardian				
This section M	chool attended:  IUST be completed even if you e area or the UK			
are new to th	e area or the ox			
Date last atten	ided:			
Reason for app for a new scho				
Please provide Education Wel		currently involved with your child e.g. Social Worker, CAMHS or		
Section 6 – T	-	ONLY if your child is currently attending another		
Please ask the	appropriate member of staff at	your child's current school to complete this section.		
I confirm that		sed with me the reasons for a transfer and I agree that a school		
	e any additional information in sider this transfer should not pr	this box relating to this transfer request (including any reason ogress).		
Signed:		Position:		
Print Name:		Date:		

## Section 7 – Declaration and signature of Parent/Guardian

This application should only be signed by someone with parental responsibility for this child. Applications without an appropriate signature may be delayed.				
I declare that all the information I have provided is true. I understand that if a place is offered on the basis of a fraudulent or intentionally misleading application from the Parent/Guardian, the offered place may be withdrawn.				
Signature:				
Signature:				
Date:				



At Stoke-on-Trent City Council we take your privacy seriously and will only use your personal information to fulfil the Authority's statutory and operational needs in relation to school admissions and for purposes required or allowed by law.

The information supplied by you is securely held on the Capita ONE database and is used by both City Council staff and those working in schools.

Information may be shared with North Staffordshire Primary Care Trust for the purpose of updating and maintaining school nurse records. It may also be shared with local schools so that 'school readiness activities' can be offered to your family. If you have any objection to this information being shared, please write to:

The Admissions and Transport Team, Children and Family Services, Floor 2, Civic Centre, Glebe Street, Stoke-on-Trent, ST4 1HH.

You should be aware that we have a duty to protect public funds. We may therefore use the information you provide for the prevention and detection of fraud, misuse of public funds and any legal or statutory requirements. We may share this information with other bodies for these purposes. We may also share this information with other departments of the council or other relevant organisations for purposes which may include enforcement.

You can find information about how we handle your personal information by visiting <a href="https://www.stoke.gov.uk/dataprotection">www.stoke.gov.uk/dataprotection</a>.