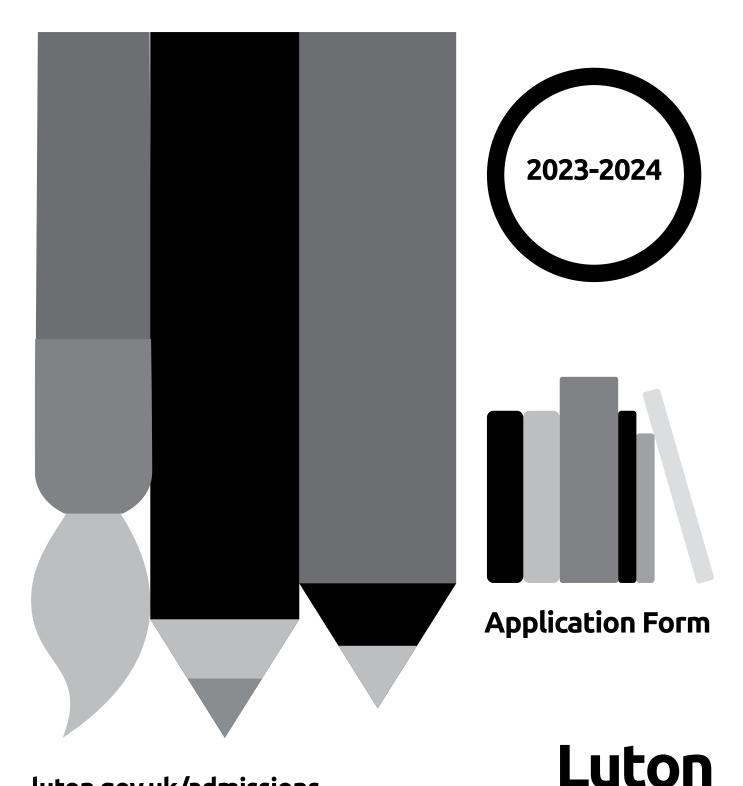
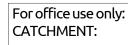
The Shared Learning Trust, Catholic Schools, Leagrave Primary School and Someries Infant School and Early Childhood Education Centre



luton.gov.uk/admissions



In-Year Application Form – The Shared Learning Trust, Catholic Schools, Leagrave Primary School and Someries Infant School and Early Childhood Education Centre only

This form should be used to request a place at:

Cardinal Newman Catholic School Warden Hill Road, Luton LU2 7AE Telephone number: 01582 59 71 25	Leagrave Primary School Strangers Way, Luton LU4 9ND Telephone number: 01582 57 19 51	Sacred Heart Primary School Langford Drive, Luton LU2 9AJ Telephone number: 01582 73 07 81	Someries Infant School and Early Childhood Education Centre Wigmore Lane, Luton LU2 8AH Telephone number 01582 41 45 45
St Joseph's Primary School Gardenia Avenue, Luton LU3 2NE Telephone number 01582 54 29 64	St Margaret of Scotland Primary School Rotheram Avenue, Luton LU1 5PP Telephone number: 01582 72 34 30	St Martin de Porres Primary School Pastures Way, Luton LU4 0PF Telephone number: 01582 61 76 00	The Chalk Hills Academy Leagrave High Street, Luton LU4 0NE Telephone number: 01582 88 41 00 Central Admissions number: 01582 81 15 15
The Linden Academy Osborne Road, Luton LU1 3HH Telephone number: 01582 21 14 41 Central Admissions number: 01582 81 15 15	The Stockwood Park Academy Rotheram Avenue, Luton LU1 5PP Telephone number: 01582 72 23 33 Central Admissions number: 01582 81 15 15		

Information and advice can be obtained by calling the relevant school.

Please read through the In-Year School Transfer Guide before completing this application form. The completed form must be returned direct to the school you are applying for.

I wish to request a place for my child at:

Name of school:		

Please indicate the date the place is required for

Child's details:

Legal first nar	me(s):		Legal last name:	
Gender:	Male	Female	Date of Birth:	
Full home add	dress:			
Postcode:				

Does your child have a sibling (brother or sister) attending your preferred school? YES / NO

If **YES**, please give details:

Legal first name(s)	Legal last name	Date of birth	Gender	Address	School Attending
Does your child have an Education Health Centre Plan?					YES / NO
Is your child 'looked a	fter' by a local authori		YES / NO		

If **YES**, please state which local authority is responsible for the child:

Please also provide a letter from your child's social worker confirming their legal status and details of the local authority responsible for the child.

Name of social worker:

Telephone number:

Was your child previously 'looked after' but immediately after being 'looked after' became subject to an adoption, residence or special guardianship order? YES / NO

If **YES**, please provide documentation to confirm that they were previously 'looked after'.

Was your child previously in state care outside of England and ceased to be in care as a result of being adopted? YES / NO

If YES, please provide documentation to confirm the status.

Is one or both parents currently employed at one of the schools?

If **YES**, please complete the details below:

Name of parent:	Name of school employed at and job title:

Child's current/previous school details:

Name of school:	
Address:	Postcode:
Telephone number:	
Name of head of year/class teacher:	
Date child last attended school:	

YES / NO

orm

Additional information

Please answer the questions below:

How well does your child speak English?	Beginner / Intermediate / Fluent
Can your child speak any other languages?	YES / NO
Have you had contact with the Education Welfare Service?	YES / NO
Has your child had contact with the Behaviour Service or the	
Psychological Service?	YES / NO
Has your child had a fixed term exclusion in the past two years?	YES / NO
Has your child been permanently excluded from school?	YES / NO
If you have answered YES to any of the above questions, please give furt	ther details.

Reas	on for request (please tick appropriate box[es])		
	Moved house within Luton		Removed from roll following extended leave
	Moved into Luton		Child has been placed in local authority care
	Starting school for the first time		Childcare arrangements
	To join sibling(s) at school		Issues in current school

Please use this space to outline any additional reasons for your application, e.g. religious convictions, medical or social reasons. Please continue on a separate sheet if necessary.

Transfer requests within Luton for reasons other than a house move

If you are requesting a transfer to another local school or your child is experiencing any difficulties at their present school, it is important for you to discuss this with the headteacher of your child's present school and ask them to complete and sign this form. The schools would expect discussions to take place before you make any decision about transferring your child to another school.

Headteacher's comments:	
Signed:	Print name:

If the form has not been signed it will be returned to you.

Checklist:

- ✓ I have provided names and dates in the places where they are requested on the form.
- ✓ I have checked to make sure all the information I have given is correct.
- I have provided the necessary supporting documentation where necessary (e.g. child's birth certificate, proof of address).
- The form has been signed by my child's current headteacher (only for school transfers within Luton where the child has not moved house). I understand that if this has not been completed my application form will be returned to me.
- ✓ I have signed and dated the application form.
- I give permission to the school to check any information given or to make any necessary enquiries. I authorise
 and request any person or body to give the council any information necessary for that purpose.

I understand that any false or deliberately misleading information on this form and/or supporting information may render this application invalid, or lead to the offer of a place being withdrawn.

Parent/carer's details

Mother's name (capitals)			
Father's name (capitals)			
Telephone number(s):			
Parent's email address:			
Name of applicant:			
Relationship to pupil:			
Do you have parental respon	sibility for the pupil?	YES / NO	
Signature of person with par responsibility:	ental		
Date:			
Please note that this form wil your application being proces	=	s are not answered fully. This will resu	lt in a delay in

When you have completed this form, please send it direct to the school you are applying for.

Applications for The Linden Academy, The Chalk Hills Academy and The Stockwood Park Academy must be sent to:

The Shared Learning Trust Central Admissions, The Vale Academy, Wilbury Drive, Dunstable, LU5 4QP. Telephone number: 01582 88 15 15.

Applications for a Catholic school in Luton must be sent to the relevant school.

Applications for Leagrave Primary School and Someries Infant School and Early Childhood Education Centre must be sent directly to the schools.

Your request will be processed as quickly as possible, normally within 15 school days and you will be notified in writing by the school to confirm whether or not a place is available. If your application is refused you have the right of appeal and you should make enquiries about the waiting list process. If you have not received any correspondence after 15 school days, please telephone the school you are applying for.

If the school you are applying for cannot offer your child a place, please contact the Admissions Team to discuss a place at an alternative school.



Supplementary Admission Form for Catholic Primary Schools in Luton

Child's full name:							
Full Address:							
Home phone number:							
Mobile number:							
Date of birth:				Gende	r	Male/Female	
						al Certificate or First Holy Communion olic Practice to be photocopied).	
Catholic	Yes/No		Parisl	n of:			
						hone number of a Minister of Religion who knows your minister that you have given his/her name	
Details of Minister of F	Religion:						
Other Christian:		Details					
Other Non-Christian:		Details					
Baptism details:		Date and address of Parish/Church					
	Name:			Name: Name:		Name:	
Details of siblings already attending	Class:		Class:			Class:	
school	Name:		Name:			Name:	
	Class:			Class:		Class:	
	Name:			Address	5:		
Details of parent/carer 1				Phone r	humb	her:	
Name:				Address			
Details of parent/carer 2						bos	
			Phone number:				

Please make sure you provide your child's original Baptismal Certificate or First Holy Communion Certificate and Certificate of Reception or Certificate of Catholic Practice to be photocopied. Parents must also ensure they complete an application form.

Privacy Notice

The schools are committed to protecting the privacy of your child and your information.

If you have any concerns or questions about how the schools look after your personal information, please contact the relevant school directly.

Data Controller	Relevant school
Data Protection Officer	Contact relevant school directly.
Personal Data Name; Address; medical details, special educational needs, school	
Purpose for using it	To provide your child with a school place
Lawful basis	To carry out the performance of a public task Special category data such as medical details are used in the public interest of supporting each child according to their needs and to take care of their well being whilst in the school setting
Who we share it with	Local authorities; education providers; NHS; safeguarding partners; catering services; pastoral support such as counselling; after school clubs; appeal panellists
Why we share it with them	To meet the statutory requirement for monitoring by the Department of Education To provide access to education To provide pastoral care, food and safeguarding where necessary
Any automated decision making	None
Transfer of data to a non-EU country	None
Exercising your rights	You have the right to ask us to amend or delete your data as well as transfer it or limit its use. You also have the right to request a review of an automated decision where you think this is wrong. Each request will be considered individually however, where we are required to keep your data by law we may be unable to action your request. In all circumstances we will explain our decision making in writing to you

If you want more information about how the schools keep your data safe please see the relevant school's main privacy statement on their website.



- **C** 01582 54 80 16
- 🖂 admissions@luton.gov.uk
- 🖵 luton.gov.uk/learning
- У @lutoncouncil
- lutoncouncil

Admissions Children, Families and Education Directorate Luton Council Town Hall, George Street Luton LU1 2BQ