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| Please complete a separate form for every child that requires a place.  **PLEASE COMPLETE THIS FORM USING BLOCK CAPITALS** | |  |
| **REASON FOR YOUR APPLICATIONS:** | |  |
| Moving into Cambridgeshire | |  |
| Living in Cambridgeshire moving to another address | |  |
| Not moving address but wishing to change schools in Cambridgeshire | |  |
| **Date you would like the school place from:** |  | |

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| **Section 1 – Your child’s details** |
| Family Name:Child’s First Name(s):Middle Name(s): |
| Date of Birth: Year Group: Male Female |
| Address where child usually lives:  Postcode |
| If your child lives part time at another address, please provide details here:  Postcode |
| How is your child’s time divided between the two addresses? |

**Please note:**

You may be asked to provide evidence of your address if there is a possibility that you may be placed on a waiting list for a Diamond Learning Partnership School based upon that schools over subscription criteria.

**Please do not send originals.**

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| If you want to apply for a place in a Diamond Learning Partnership school, but you know the school is full, make sure you name it on this form anyway. This will ensure your details are added to any waiting list and you are informed of your right appeal. Preferences for schools other than a school within The Diamond Learning Partnership Trust will be sent to the Local Authority Admissions Team for processing. |
| I wish my child to attend one of the following Diamond Learning Partnership schools, in order of preference. |
| 1st Preference |
| 2nd Preference |
| 3rd Preference |

**Please note:**

Proof of date of birth will be required once an allocation has been made and provided to the relevant Trust school to determine the correct year group for the child to be placed in.

If you are moving in to the uk, we recommend you visit the following websites to confirm that you are aware of the home office regulations and laws on state education https//www.gov.uk/study-visit-visa and <https://www.gov.uk/standard-visitor-visa>

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| **Details of your child’s current school** |
| Name of school |
| Address |
| Is your child currently attending this school? **Yes No**If **NO** – what was the last date your child attended this school? |
| Does your child have An Education, Health and Care Plan (EHCP**) Yes No** |
| Is this child **Looked After** i.e. in public care / fostered by you, **Previously Looked After,** now adopted, subject to a Residence order or Special Guardianship Order?  **Yes No**  **If Yes, this application should either be completed by the child’s Social Worker or you must provide relevant documentation evidencing this.**  **Are you privately fostering this child?**  Private fostering is when a child under the age of 16 (or 18 if the child has a disability) lives with someone who is not a close relative (i.e. not their grandparents, aunt, uncle, brother, sister, cousin or step-parents) for 28 days or more unless that person has parental responsibility for them or is a local authority or agency foster care. A private fostering arrangement, whether it is already in place or will be in the future, must by law be reported to the County Council. To notify the County Council of a private fostering arrangement please call 01223 518730. |

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| **Section 2 – Your details** |
| Title: Mr / Mrs/ Miss / Ms / Dr Initials: Surname: |
| Relationship to child: |
| Address (if different from child’s address in Section 1): |
| Contact Tel. No: Mobile No:Email address: |
| **Other adults with Parental Responsibility for the child** |
| Title: Mr / Mrs / Miss / Ms / Dr Initials: Surname: |
| Relationship to child: |
| Address (if different from child’s address in Section 1): |
| Contact Tel. No: Mobile No: |

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| **Section 3 – Brothers and sisters** | | |
| If you have any other children living at the same address as the child in Section 1, please complete this section. This will only be used if Over Subscription Criteria is required to be applied to a waiting list. | | |
| **Name** | **Date of Birth** | **School** |
| **Section 4 – House moves** | | |
| If you are moving into or within Cambridgeshire, please state the address to which you will be moving to and the anticipated moving date: You may be asked to provide evidence of your address if there is a possibility that you may be placed on a waiting list based on a school over subscription criteria.  **Address:**  **Anticipated moving date:** | | |

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| **Section 5 – Declaration** |
| I understand that: |
| I declare that the information contained in this form is both accurate and up-to-date. |
| The information on this form will be held and used by The Diamond Learning Partnership Trust Admissions in accordance with the Data Protection Regulations for the purposes of administration of school admissions. We collect your details to process your application for school admissions and may contact you about related school admission and transport issues.  *Further information about how we collect and use data and your rights around this, can be found on our GDPR Policies and Procedures page on our website:* www.diamondlearningtrust.com |
| If I am applying for a school in another Local Authority Area this form will be sent to that Local Authority Admission Team for processing. |
| If I am applying for a school(s) that is / are their own admission authority, i.e. an Academy, Foundation or Voluntary-Aided School, this form may be sent to them. |
| All adults with parental responsibility for the child are in agreement with this application, and understand if a dispute is later raised, this application may be cancelled. |
| I hereby give permission for the information on this form to be shared with the Parent Partnership Service and other relevant officers, where appropriate. |

**I confirm that I have:**

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| Signed the form |  |  |
| Named my preferred school(s) |  |  |

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| Signed: Dated: |
| Signed: Dated: |

**Administration / Processing of Applications**

We aim to operate a **ten-school day** turnaround from the date your application is received. You can email your application to the address below. Please put your 1st choice school in the subject line along with your child’s surname and Year group.

For example. **Winhills** **School-Smith- Yr. 1**

**Admission Team Contact details:**

Please email all applications and enquiries to [admissions@diamondlearningtrust.com](mailto:admissions@diamondlearningtrust.com)

Telephone: 07708 089454

**Postal Applications should be sent to:**

Admissions

Burrowmoor Primary School,

Burrowmoor Road,

March, Cambs

PE15 9RP