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# Alban Wood Primary School and Nursery Application Form In Year Admissions

- Before you fill in this form, please read the guidance documents and information on our website at <http://albanwood.herts.sch.uk/>
- Supplementary Information Forms (if applicable) and any additional supporting documentation should be returned direct to the school
- Please complete this form using black ink and CAPITAL LETTERS
- **You must include two recent (within the last 3 months) forms of address evidence.** One must be a council tax bill, utility bill, solicitor's letter showing completion date or a signed tenancy agreement. Please do not send originals.
- If moving/returning to the UK, you must also provide evidence of your arrival. This can be flight itinerary, boarding passes or ferry/train tickets.

**We cannot process an application without evidence of your address.**

## Section 1: Your child's details

**Date place is required\*:**

\*Places are offered on the basis that they will be taken up within 10 school days. Please do not apply more than 4 weeks in advance of the date you require a place unless you are a service family.

### Your child's details:

First name	Middle name(s)	Family name/Surname
Date of birth	Current Year Group*	Female / Male

\*The school will allocate a place into the usual year group based on your child's date of birth. If you wish your child to be educated in a different year group to that indicated by their date of birth, please provide further details by completing the APPLICATION FOR ADMISSION OUTSIDE NORMAL AGE GROUP form.

<b>Your child's current address and postcode</b>	Current address
We check addresses and we will withdraw our offer of a school place if you give a false address	Postcode

<b>Your child's new address and postcode</b>	<b>If you are moving house, please provide the new address below:</b>
Date of move*	Postcode

\*Please ensure you enclose proof of your new address including the move date. This can be either a solicitor's letter confirming completion or a copy of the formal lease agreement. If you are moving to a rental property, please provide evidence that you have sold or are in the process of selling your previous property, or that a previous lease agreement has ended. We will not be able to take into account a new address without proof as referred to above.

## Section 2: Application details

<b>Does the child have a sibling at the school? * If yes, please give details below:</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Name:</b>	<b>Male/Female:</b>
	<b>Date of birth:</b>

\*A sibling is either the sister, brother, half brother or sister, adopted brother or sister, child of the parent/carer or partner or a child looked after or previously looked after and in every case living permanently in a placement within the home as part of the family household.

<b>Does your child have an Education, Health and Care Plan (EHCP)?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
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An EHCP is a document written by the local authority detailing the child's needs and the measures the school will take to help them. The SEN team at the local authority manage admissions for children with an EHCP and your application will be passed to them.

<b>Is the child you are making an application for a child looked after? (Please refer to the oversubscription criteria in the policy)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate which local authority and include a supporting letter from the child's social worker and/or advisory teacher:	

<b>Was your child previously looked after but was then adopted or became subject to a child arrangements order or special guardianship order? (Please refer to the oversubscription criteria in the policy)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide supporting evidence including a copy of the adoption order if applicable	

<b>Are you applying under Rule 2 (exceptional medical or social needs or child looked after from abroad)?*</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
*You must include supporting professional evidence clearly demonstrating why your child's needs can only be met at one specific school on the 'Priority 2 form - exceptional medical or social need'. Please include all the evidence you wish us to consider as we can only consider the information received at the time of application. Rule 2 can only be re-considered if there has been an exceptional change of circumstances	

<b>Are you applying under the Children of Staff rule if applicable?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>

<b>Are you or your partner UK service personnel or a crown servant?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please include an official MOD, FC or GCHQ letter showing relocation date	

<b>Your child's current school</b>	
School Name	School Address
Date last attended (if your child has left):	

### Section 3: Your details

<b>Name of person making the application</b> (Usually a parent/carer)	Title	Initial	Family Name
<b>Address if different to that given above</b>			
<b>Daytime telephone number</b>			
<b>Email address</b> Our preferred way to contact you			
<b>Your relationship to the child</b>			

<b>Is the child living with you under a private fostering arrangement?</b> This is where the child lives with an adult who is not a close relative i.e. not a parent, grandparent, sibling, aunt or uncle.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Do you have parental responsibility? *</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, please provide permission from the person(s) with parental responsibility confirming they are in agreement with the application.	

**Section 4: Parental declaration**

If you deliberately give false information, we may withdraw the offer of a school place.

**All of the information I have given on this form is correct and up to date.**

**I have read and understand the school's admissions policy.**

**I understand that you will inform my child's current school of this application**

**I understand that my child must be able to take up the allocated school place immediately and that the place may be withdrawn if not accepted within 10 school days.**

I confirm I have parental responsibility for this child and/or the agreement of all persons with parental responsibility

I enclose: Supporting evidence relating to the application, including proof of arrival if applicable

Proof of address - **we cannot process the application without this.**

Your full name			
Your signature		Date:	

Please return this application form to the office of:  
Alban Wood Primary School and Nursery  
The Brow  
Watford  
WD25 7NX

**It is very important that you include all necessary documentation with your application in order to avoid any delays.**