

INCAF-P

Common Application FormFor In-Year Primary School Admission

This form should be completed by all wishing to apply to HOUNSLOW SCHOOLS ONLY.

If you are applying for a place at a **church or selective school**, you will be required to complete a **supplementary form** in addition to this form. This can be obtained directly from the school to which you are applying and must be returned back to the school.

Completed forms must be returned to: School Admissions Team, London Borough of Hounslow, Civic Centre, Lampton Road, Hounslow TW3 4DN.

1. Child's details					
Child's first name:	Child's first name: Middle name(s):				
Child's surname/la	st name:				
Child's date of birth: Day (figures): / Month (word): / Year:					/ Year:
Boy ☐ Girl ☐	(please tick)				
Twin or multiple birth	Yes □	No □	(please tick)		
Child's home addre	ess (This must	be the	address where your	child pern	nanently resides):
Postcode:		Dat	e of moving to this a	ddress:	
If you are moving t	o a new addre	ss in the	e Hounslow Borough	ı - please	give details (including date):
Postcode:		Mov	ving Date:		
EMS number:			e received by cess Hounslow:		Date received by Admissions office:

2. Fair Access Admissions

pos	ssible. To help us do		ox relevant to		re found a suitable sch child and provide writter	
	Is a refugee / asylur	n seeker 🗆 Is	a traveller		Is a carer - please pro	ovide details
	Is being educated a	t home - how long?				
	Has been temporari details	ly or permanently excl	uded or at ris	k of pe	ermanent exclusion - ple	ease provide
	Has a history of seri	ous attendance proble	ems			
	Has a disability or medical condition. Please provide evidence.					
	Is the child in Care of a Local Authority. If yes, please attach a copy of a letter from a Social Worker to confirm that this is the case and advise which Authority:					
		•			Health & Care Plan. If you	· •
3	. Reason for Ap	plication				
sig any	nificant behavioural is schools within the	ssues at their current	or previous s ounslow may	chool to	ow 90% without good re that resulted in exclusion etermined by the Counc our child.	on, admission to
4	. If your child h	as entered or re-	entered t	he Uk	K within the last 6	months
Da	te of entry:		Anticip	ated le	ength of stay:	
Pre	evious country of resident	dence:	Child's	first la	anguage:	
Doe	es the child speak any Eng	lish? (please tick appropriat	e box) None	□ Little	e 🗆 Good 🗆 Fluent 🗆	
5	. Child's Currer	nt and Previous S	School (ev	ven if	overseas)	
Na	me / address of child	's current school:				
			Telephone nu	mber of	f school:	
Sta	art Date:	End Date:	Is your child	still at	tending this school? You	es 🗆 No 🗆
Pre	evious school attend	ed_				
Sch	nool name/borough:		From:		To:	

6. Other children

Please nar	me all other children	(including adopted child	ren) living at home	, for whom you receive Child Benefit
Child's na	ame:	Date of birth:	School	:
7 Par	ent's / Carer's	dotails		
Title (pleas	e circle) Mr Mrs	Miss Ms Othe	r (please state)	Middle name:
Surname: Relationship	o to child Mother [ep Parent □ Fo	ster Carer Other
		ss (full address includir	•	Ster Carer - Other -
T di citt ci v		oo (ran aaarooo molaan	<u>19 pootoodo).</u>	
Postcode:				
Daytime tel	ephone:	Evenin	g telephone:	
Mobile:		Email (print):	
8 Sch	ool preference	es (with reasons)		
	e up to 3 different	If you are applying for	r a church or	If you think that there are exceptional
schools tha	at you wish to apply r of preference.	selective school, yo complete any suppler	u must also	medical or social reasons why your child should attend a particular school, you Must
You do not have to use all three preferences. List all state schools or		applicable. Your appli	ication details will be	provide a supporting letter from a Hospital Consultant or a Social Worker with this form
•	ot private schools) for which	h appropriate. Please of on the right if you wish your preferences for an	to give reasons for	
For office use only	Name and address of school	First name, surn date of birth of an or sister currently the school	y brother	Reasons for preferences (optional) Applications for priority under exceptional medical or social grounds will only be considered if the required supporting documents are attached to your form.
	Preference 1			
	Preference 2			
	Preference 3			

9. Signature of parent or carer

- I wish to apply to the schools listed in section 8, which I have ranked in my order of preference.
- I certify that I am the person with parental responsibility for the child named in section 1, and that the information given is true to the best of my knowledge and belief.
- I understand that any false or deliberately misleading information given on this form and/or on supporting papers or any relevant information withheld, may render this application invalid and could lead to the withdrawal of an offer of a school place for my child.
- I understand that by making this application I agree to other council records being checked.

Parent's/carer's signature:	Date:	
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Documents required

- 1) Proof of Address A current council tax bill ... or ... tenancy agreement plus two alternative documents: bills/bank statements/driving licence etc. in the applicant/s (parent/carer's) name.
- 2) A Photocopy of Child's Birth Certificate.
- 3) A Photocopy of The Child's Passport and Visa (if your child has entered or re-entered the UK within the last 6 months).

Checklist				
Before handing in your application, make sure that you have gone through the checklist below. Please note that without the following, your application will be considered incomplete and may delay the admission of your child.				
F	Read the notes on the front of the application form			
	Completed all relevant sections of this form			
F	Attached Proof of Address to this application form. Please note that without this documentation we will be unable to process your application. Provided a copy of the child's Passport and Visa if your child has entered or reentered the UK within the last 6 months- please note that the child must be present at the time of the application and documents must be verified by a member of the Admissions Team.			
F	Provided a copy of your child's Birth Certificate.			
E	Enclosed evidence from relevant professionals (if you have ticked a box in section 2)			
	Completed any supplementary information forms if you have applied for a church school or selective school and returned it back to the school.			
This form, when completed, signed and dated, should be returned to: School Admissions Team, London Borough Of Hounslow, Civic Centre, Lampton Road, Hounslow TW3 4DN				

Data collection notice

In accordance with the Data Protection Act 1998, the London Borough of Hounslow will use your information, for the purpose of processing your application for a secondary school place, to (a) deal with your requests and administer its departmental functions; (b) meet its statutory obligations; (c) prevent and detect fraud. The council may share your information (but only the minimum of information necessary to do the above and only where it is lawful to do so) with other departments within the council (including the elected members), central government departments, law enforcement agencies, statutory and judicial bodies, community service providers and contractors that process data on its behalf. The council may also use and disclose information that does not identify individuals, for research and strategic development purposes.