

PART A - PLEASE READ BEFORE COMPLETING THIS FORM

This form should be submitted for pupils wishing to continue to attend a non catchment primary or secondary school they are currently enrolled in, following a house move, OR where a pupil wishes to transfer school within the school year.

You can find your catchment school at <https://nearme-dumgal.hub.arcgis.com/>

You must complete one form for each child you wish to request a place for.

Catchment School	
Current Stage/Year	
Current School	
Requested School	
Requested Start Date	

Your child's details – all correspondence via address detailed below

Forename(s)		Surname	
Date of Birth			
Home Address: Address where child spends the majority of their time per week. For shared care, use the address of parent in receipt of Child Benefit.			
First line of address			
Second line of address			
Village/Town			
Postcode			

Baptised Roman Catholic (baptismal certificate or supporting letter from the Roman Catholic Church to be shown to school office)

Yes

No

First language of child				
Will the child need support with English language	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Details of main parent(s)/carer(s) who live with the child at the above address			
Parent / Carer 1		Parent / Carer 2	
Title: (i.e. Mr, Mrs, Ms, Mx, Miss, Dr)		Title: (i.e. Mr, Mrs, Ms, Mx, Miss, Dr)	
Relationship*		Relationship*	
Name		Name	
Telephone		Telephone	
Email		Email	
* Parent, grandparent, kinship carer, legal guardian, foster carer, other			

Signed (Parent/Carer)		Date	
PLEASE NOTE YOUR CHILD MUST CONTINUE TO ATTEND THEIR CURRENT SCHOOL UNTIL YOU RECEIVE A DECISION TO THE TRANSFER REQUEST FROM THE RECEIVING SCHOOL. THIS DECISION AND AGREED START DATE SHOULD BE WITHIN 5 WORKING DAYS OF RECEIPT OF PART A and PART B OF THE FORM.			

PART B - THIS SECTION MUST BE COMPLETED BY CURRENT HEADTEACHER**THE DECISION FOR THE PUPIL TRANSFER MUST BE AGREED AND COMMUNICATED WITHIN 5 WORKING DAYS OF RECEIPT OF PART A.**

Date Received Part A		Response Date Due	
Name of Pupil		Current Stage/Year	
BGE: CFE Levels	Literacy	Numeracy	
Or Senior Phase	Presentation Level: N1-N5, H, AH		
Attendance as a %			
Current level of Support	None	Universal	Targeted
Is this transfer in the best interests of the pupil?	Yes		No
Is there a need for a multi-agency meeting prior to transfer	Yes		No
PRIMARY REASON FOR TRANSFER:			
Change in family circumstances			
Relationships with peers			
Accessibility			
Curriculum offer			
ARE THERE ANY RESOURCE IMPLICATIONS FOR THE RECEIVING SCHOOL?			
Additional teachers	Yes		No
Support for Learning	Yes		No
Other (Give details below)			

PART C – Chronology of Transfer Request				Date
Initial Contact from Parents/Carers				
Pupil Transfer Form issued to the Parents/Carers				
Completed Pupil Transfer Form received				
Contact with Headteacher of Requested School				
Outcome of Transfer Request				
Transfer request agreed	Yes		No	
<i>Where there is a disagreement about the Pupil Transfer, reasons must be stated and submitted to the relevant Quality Improvement Manager within 5 working days of outcome.</i>				
<i>The Quality Improvement Manager will make appropriate arrangements to assess the situation and will make a decision based on the information available.</i>				
				Date
Signature of Parent/carer				
Signature of Headteacher of Current School				
Signature of Headteacher of Requested School				

The completed form, Part A-C, to be submitted to EducationSupportHub@dumgal.gov.uk