



St John the Evangelist Church School

In-Year Application Form

(To be used only in order to apply for a school place required during the academic year)

This form must be completed and submitted directly to the School

By post: St John the Evangelist Church School, Fosseway, Clevedon BS21 5EL

Email: office@stje.bwmat.org

- Please provide all the required information.
- Applicants are advised to refer to the published school Admission arrangements before completing this application form
- The applicant will be notified of the admission decision in writing within 10 school days of the Admission Authority receiving the completed application form.

Section 1: Your requirements

In which Year Group is the place required?	
When is the place required? (dd/mm/yyyy)	
School use only: Insert the date on which this application was received at the school	

Section 2: Your Child's details (the child who is the subject of this application)

Please enter the required detail or circle 'Yes' or 'No' throughout

Last Name		First Name	Middle Name(s)
Male	Female	Date of Birth (dd/mm/yyyy)	Registered Nationality

Please enter the home address at which your child lives for the majority of his/her time (more than 2.5 <u>school</u> days per week)					
How long has he/she lived at this address?		Enter:	Years	Months	Weeks
Are there any formal shared residency arrangements in place for your child?			Yes	No	

Please note: If your family is currently moving house and you would like this application to be considered on the basis of your child's future home address, you must enclose with this application a copy of the legal

Appendix B - Admissions Arrangements 2018-19

Does he/she have European Economic Area Citizenship?	signed Yes by the landlord	No
Is he/she currently a 'Looked After Child' - a child in the care of a Local Authority?	Yes	No
Is there an adoption, child arrangements or special guardianship order in place?	Yes	No
Does he/she have an Education Health and Care Plan (EHCP) in place or agreed at the time of application?	Yes	No
Does this child have a sibling currently attending the School being applied for? Refer to section 1.5 of the Admission Arrangements	Yes	No
If 'Yes' enter the details of any <u>one</u> sibling who is currently registered on the roll of this school		
Last Name	First name	DOB: dd/mm/yyyy
		Relationship

Section 3: Supporting Information

The information provided in sections 1 and 2 will be used to inform the admission decision, taking account of the published oversubscription criteria where necessary to do so. A place will be offered in the year group requested, only where a further admission would not impact negatively on the school and so prejudice the 'efficient delivery of education or the efficient use of resources'.

Where a place **can** be offered, the information provided below will help the Admissions Committee to determine any specific support the particular child will require on joining the school.

Where a place **cannot** be offered because the admission would 'prejudice the efficient delivery of education or efficient use of resources', the information provided below will help to identify whether the child qualifies against one or more of the key criteria set out in the North Somerset Council Fair Access Protocol. If so, the application will be referred to the 'home' Local Authority in order that this authority may, where necessary, engage with the family concerned and identify a suitable educational placement without undue delay.

Is he/she currently on the roll of a United Kingdom school?	Yes	No
If NO , when did he/she last attend school? Enter month/year		
Is he/she designated as a registered carer for another person?	Yes	No
Is he/she entitled to a Pupil or Service premium?	Yes	No
Does he/she have any special educational need, disability or medical condition that the school should be aware of?	Yes	No
Does he/she have a registered support worker?	Yes	No

Is there any other information that you would like the School to be aware of?

Appendix B - Admissions Arrangements 2018-19

Section 4: Applicant Details (the applicant is the person completing this form)

Please enter the required detail or circle 'Yes' or 'No'

Last Name	First Name		Title
Your relationship to this child	Parent	Carer	Other

Do you live at the same address as the child you are applying for	Yes	No
If 'No' then please provide your full address (include post code) for communication purposes		

Land line telephone number	Mobile number	Email address

Section 5: Declaration and Signature

This application will not be processed unless signed and dated by the applicant. By signing, the applicant confirms that:

The information provided on this application form (and any supplementary information that may be provided in support of this application) is accurate to the best of the applicants' knowledge and not intended to mislead in any way.
The offer of a school place may be withdrawn if any of the information provided in connection with this application is subsequently found to be intentionally misleading or false.
The information provided may be shared by the Admission Authority to the extent that is required in order to determine the school admission decision, subject to the requirements of the Data Protection Act 1988.
The applicant is legally responsible for the child concerned or that he/she has appropriate consent from the legally responsible party to submit this school place application
He/she is aware of the In-Year admission application process set out in Section 3 of the Admission Authority's published Admission Arrangements.

Applicant's Signature	Date: day/month/year