Sacred Heart Catholic Primary School and Nursery



Headteacher Mr C Beazeley

Windermere Road, Southend on Sea, Essex, SS1 2RF

Phone: 01702 414200

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# **In-year Application Form**

Please provide the school with the following information, to enable your child to be considered for a place at the Sacred Heart School. This form is used for applications to years 1-6.

# **Part A**

# Pupil Details

| Forename/s |  |
| --- | --- |
| Surname |  |
| Known as |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Birth  |  | Male  |  | Female  |  | Current Year  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Current Home Address  |  | New/Moving Address You must provide proof of address  |  |
| Date Moving  |  |
| Current School  |  | Last day Attended school  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Has your child been permanently excluded? |  | Yes |  | No  |  |

|  |  |
| --- | --- |
| Please provide the date you would like to start at Sacred Heart: (Please make it clear if you are seeking a place for September start (for next school year)  |  |

# Reasons for application

|  |  |
| --- | --- |
| 1. Moving into the Southend
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| 1. Moving to a different address in the Southend Area?
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| 1. Moving to Southend from Abroad. Please provide copy of passport and visa
 |  |
| 1. Not moving but wanting a new school
 |  |

# Siblings

Does the child have a sibling attending Sacred Heart, please provide their details:

|  |  |  |  |
| --- | --- | --- | --- |
| Name  | Date of Birth  | Year Group  | Current school |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Parent/ Carers details

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Mr/Mrs/Miss/Ms |  | Forename  |  | Surname  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Relationship to child?  |  | Home Telephone no.  |  |
| Work telephone no.  |  | Mobile telephone no.  |  |
| Email Address |  |

# Further details

If you answer yes to any of the below, please ensure to provide a copy of the relevant documentation

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is your child looked after by a Local Authority or is your child previously looked after?  | Yes |  | No |  |
| If your child is adopted, or has a special guardianship order, or has a child arrangements order, after having been looked after by the state, please provide a copy of the order and the details of the Local authority. This also applies if the child was in state care abroad before being adopted. | Yes |  | No |  |
| If yes, which Local Authority  |  |
| Please add your social workers name and contact details  |
|  |
| Is your child a member of a Service or Crown Family? Please provide letter from the MOD with details  | Yes |  | No  |  |

# Admission criteria

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| --- |
| Please indicate which of the criteria you feel best matches your application. More details on criteria can be found on the school’s admission arrangements.  |
| Looked After children from Catholic Families | Yes |  | No |  |
| Baptised Catholic children residing in the parish (Sacred Heart and St John Fisher parishes) | Yes |  | No |  |
| Baptised Catholic children residing outside the parish  | Yes |  | No  |  |
| Other Catholic children  | Yes |  | No |  |
| Looked After children, not from Catholic Families | Yes |  | No |  |
| Catechumens and their children seeking baptism and members of other Eastern Christian Churches | Yes |  | No |  |
| Children of Christian denominations whose membership is evidenced by a minister of religion | Yes |  | No |  |
| Children of other faiths whose membership is evidenced by a minister of religion | Yes |  | No |  |
| Children whose parents have shown a preference for Sacred Heart School | Yes |  | No |  |

# **Part B**

# Supplementary Information From

This information is not used for the admission but assists with ranking your application and to support the placement at the school where a place is offered.

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| If your child has been baptised as a Catholic, please complete the boxes below: |
| Baptism Date: Parish: (Please enclose a copy of your child’s Baptism Certificate)  |

|  |
| --- |
| If your child is Catholic, you may also ask a Priest to support your application, by completing a Certificate of Catholic Practice. This provides information to enable us to apply our admissions criteria. Please give details of the Priest who has agreed to support your application. |
| Priest Name: |
| Church: |
| Address: |

|  |
| --- |
| Please complete this section if your child is NOT Catholic: |
| If your child is a member of another faith, please give details:(Please enclose a copy of your child’s baptism certificate or equivalent if appropriate) |  |
| If your child is a member of another faith you may request a letter, from your Minister/Religious Leader in support of your application.(Please tick the box if you intend to do this) |  |

To support your child where a place is offered, please complete the following

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Does the child have an Education and Health Care Plan/statement?  | Yes |  | No |  |
| Is the child currently receiving SEN support in school?  | Yes |  | No |  |
| Does the child have an Individual Support Plan (ISP)?  | Yes |  | No |  |
| Does the child have an Early Health Assessment (EHA)? | Yes |  | No |  |
| Is the child registered as disabled?  | Yes |  | No |  |

If you have answered YES to any of the questions above, please give details below or an additional paper.

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| --- |
|  |

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| --- |
| Have any of the following services been involved with your child in the last three years?YesNo |
| School Attendance | Yes |  | No |  |
| Educational Psychologist  | Yes |  | No |  |
| Social Worker | Yes |  | No |  |
| Home Education | Yes |  | No |  |
| Child and Family Services  | Yes |  | No |  |

If you have answered YES to any of the questions above, please give details below (or on additional paper) including a contact name and telephone number.

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|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is your child a refugee? Please provide copy of refugee status | Yes |  | No |  |
| Does your child have a visa for the UK please provide a copy and a copy of the child passport  | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is your child a young carer? Further information is available [here](https://www.southend.gov.uk/help-advice-carers/young-carers-1)  | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is there any additional information you wish Sacred Heart to be aware of?  | Yes |  | No |  |

If yes, please give details below.

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| --- |
|  |

I confirm that the information I have given is true and that I have parental responsibility for this child.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed:  |  | Date  |  |

|  |  |
| --- | --- |
| Once completed this form must be returned to Sacred Heart Catholic Primary school  | Admission to Sacred Heart Catholic Primary School is in accordance with the determined admission arrangements. If the number of applications outnumbers the admission limit, applications are allocated/ held on a waiting list in accordance with the School Admission Criteria and therefore not all applications will be successful.  |

As required by the School Admissions Code 2021, your details and the outcome of this application is provided to Southend-on-Sea Borough Council.