

Children and Young People's Services

Shirehall, Abbey Foregate, Shrewsbury SY2 6ND



Shropshire
County Council

Application For Transfer To Secondary School: 2009/10

Shropshire residents only can apply online (www.shropshire.gov.uk) or use this application form.

Please read the Parents' Guide to Education in Shropshire before making your application.

The closing date for applications is **7 November 2008**. All completed forms should be returned to your child's primary school (if a Shropshire maintained primary school) or to the Admissions Team at the above address.

Out of county applicants should contact their own Local Authority for the appropriate application form.

1 PUPIL DETAILS

Forename/given name	Middle name(s)	Surname/family name
Date of birth Day: <input type="text"/> Month: <input type="text"/> Year: <input type="text"/>	Gender (please tick) Boy <input type="checkbox"/> Girl <input type="checkbox"/>	If TWIN, please tick box and complete an application form for each child <input type="checkbox"/>
Home Address (this must be the normal and <u>genuine</u> residence of parent/carer who has care of the child, that is, the address at which the child is expected to reside for the majority of the time)		
.....		Postcode:
In the case of a house move please enclose a solicitor's letter confirming exchange of contracts or copy of a rental agreement.		

2 SCHOOL ATTENDED AT PRESENT (and its address if not within Shropshire):

.....
.....

3 SCHOOL PREFERENCES:

Please name, in order, your preferences for 3 schools, which may include schools in other Local Authorities.

It is in your child's best interests to state 3 preferences. We will always try to meet your 1st preference.

(If you do not live in Shropshire please ensure you contact your own Local Authority and ask for their application form.)

For Office use

1st Preference School:	
2nd Preference School:	
3rd Preference School:	

4 OLDER BROTHER(S) OR SISTER(S): If your child will have an older sibling* of compulsory school age **still attending** your preferred school in September 2009, please give the following details (*sibling is defined on p.46 of the Parents' Guide)

Forename/given name of sibling	Middle names(s)
Surname/family name	Gender (please tick): Boy <input type="checkbox"/> Girl <input type="checkbox"/>
Date of birth Day <input type="text"/> Month <input type="text"/> Year <input type="text"/>	School Attended:
Home address (if different to that in section 1 above)	Postcode

5 STATEMENT OF SPECIAL EDUCATIONAL NEEDS:

Does your child have a statutory Statement of Special Educational Needs?

(If in doubt please contact Inclusion Services on (01743) 254304).

Please tick box if YES

6 LOOKED AFTER CHILDREN

Please tick box if the child is "looked after" by a Local Authority and state which Local Authority.....

Please tick box if YES

