

Loudwater Combined School

Learn, Create, Succeed Headteacher: Mrs. Clare Cunnington a: School Way, Kingsmead Road Loudwater, High Wycombe Buckinghamshire HP11 1JJ

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IN YEAR ADMISSION FORM – Supplementary Information Form

Please provide this form together with the completed application form.

1. CHILD'S DETAILS								
First		Legal						
Name(s)		Surname						
Date of Birth	Male / Female		nale	Year Group:				
L/_								
2. Supplementary information to support the IN-YEAR application								
,								
Are you applying on behalf of a 'child in care' of a Local Authority? Some children are cared for by a Local Authority, and a Social Worker will act as parent for the child. If your child is supported by	YES / NO If 'Yes' please tell us which local authority supports the child and give a social worker contact name and telephone number. Social Worker contact name:							
a Social Worker please give us their name and contact details.	Telephone number: Local Authority:							
	YES / NO							
Are you or your partner a serving member of the Armed Forces or a Crown Servant?	If you are being posted to Buckinghamshire, please provide a copy of the posting order.							
Does your child have exceptional medical or social reasons why he/she should attend Loudwater Combined School?	YES / NO If 'Yes' please attach details, you will need to include written support from an appropriate professional person.							

Exceptional Reasons: These will only be considered if evidence is provided. If you think your child has a disability as defined in the Equality Act 2010 and you have decided on applying to Loudwater Combined School with this in mind, and please give us more details. Add a separate sheet if necessary.

Does your child hold a statement of Special Educational Needs (SEN) or Education Health and Care Plan (EHC)?

YES / UNDERGOING ASSESSMENT / NO (delete as appropriate)

If the answer above is 'Yes or 'undergoing assessment' please indicate here which local authority is involved.

A Statement of SEN or ECH is a document written by the local authority detailing the needs that a child has in learning at school, and the measures which the school will take to help them. The admission of children who already have statements or EHC will be managed by the SEN team and advice will be sought from them.

Your child may not currently have a statement of Special Educational Needs or EHC but they may receive extra support in school for special needs. If so please indicate the type of support here:

ls your child curre	ently supported by	other agencies	?			
for attendance issu	l Services, Education es, Educational Psyd ntal Health Service, A	chology service,		Supported by:	YES / NO	
Please provide th details so we can child can be supp their change of so appropriate profe	ensure that your ported through chooling by					
	wn your child from why: (e.g. Education)				ggested move, yo	ou are
Has your child been permanently or temporarily excluded from any of his/her previous schools?			YES / NO			
	hich school(s) and hool in order to proc			son(s). Please not	te that we will co	ontact your
Date(s)	sion					
information and w	: If your child is not cu ould be grateful if you for monitoring purpose	could indicate you				
White	British		Asian/	Asian British	Indian	HCK HEIE
	leigh				Dekiet!	
	Irish				Pakistani	
	Traveller of Irish Heritage				Bangladeshi	
	Gypsy/Roma				Any other Asian	
	Any other white		Black/	Black British	Background Caribbean	
Mixed	background White and Black				African	
MINGO	Caribbean					
	White and Black African				Any other Black Background	
	White and Asian		Any ot	her ethnic background		
	Any other mixed background					
Chinese	Chinese					
Child's	Country of Birth					

Child's Nationality _____

PARENTAL DECLARATION

I certify that I have parental responsibility for the child name in section 1.

I confirm that the information I have provided is to the best of my knowledge correct and up to date. I understand if I give any false or deliberately misleading information on the form and/or supporting documentation or withhold any relevant information, this may lead to the withdrawal of an offer of a school place for my child.

I hereby authorise Loudwater Combined School staff to contact all or any of the previous schools listed above.

Signature of parent/carer:	Date:

Information supplied will be used for registration purposes under the Data Protection Act 1998





