In Year Primary School
DIGITAL Transfer Form

Guidance Notes

If you wish to apply for a Bury Primary School, the application process is in two parts.

1. An Application Form which should be completed by the parent/carer; and
2. An Information Pack which should be completed by the head teacher of your child's current school (with the exception of those families moving from a foreign country).

Failure to ensure all sections of these forms are completed and all requested paperwork is provided, will result in the form being returned for completion which will delay the application.

The completed Application form and Information pack should be returned to the school you wish to apply for.

If your child has an Education, Health and Care Plan (EHCP), this application must be directed to:

SEN Team
3 Knowsley Place
Duke Street
Bury Council
BL9 0EJ
Or via email to senteam@bury.gov.uk

Things to consider

Transferring schools mid-year can often be disruptive and detrimental to a child's education and where possible we would recommend that your child remains at their current placement. Before taking the decision to transfer you child, please ensure you have done everything possible to try and resolve the situation; and considered the points below.

Behaviour Changing school can sometimes help to improve a pupil's behaviour but this is not always the case. There are many reasons for poor behaviour and it is important everybody works together in trying to address and resolve the difficulties. Consider how much support your child received at their present school and if moving might jeopardise that.

Bullying All schools have anti-bullying policies and can often resolve issues if given chance. Before making the decision to transfer your child, which can in itself be disruptive, consider if school have been given the opportunity to rectify the situation.

Disagreements If your disagreement is with someone within the school, please allow them the opportunity to put things right.

Uniform A change of school will mean a change of uniform for your child; there is no uniform grant to assist with costs available in Bury.

Travel Consider how your child will travel to their new school and the disruption to your schedules and additional cost this may cause.

Peer groups If your transfer of school is due to the negative impact from peers, you should consider that there are also negative implications to transferring schools. It is often better to work with the current school to address matters before moving a child away from an established friendship group. Schools have excellent tools to resolve broken friendships and we would advise this is considered in the first instance.

Application Form

Date received**:** **Click here to enter text**
Child's first name **Click here to enter text**
Child's surname **Click here to enter text**
Child's date of birth **Click here to enter text** MALE/FEMALE * **please delete**
Child's home address **Click here to enter text**
Length of time at this address? Yrs Months If you are moving to the above address, what is your move date? **Click here to enter text** ** Please provide a copy of your rental/purchase agreement for your new address.
Preferred schools School 1 ? **Click here to enter text** School 2 ? **Click here to enter text** School 3 ? **Click here to enter text**
Parent details: Mr / Mrs / Ms / Other **Click here to enter text** First name **Click here to enter text** Surname **Click here to enter text** Tel number **Click here to enter text** Email address **Click here to enter text** Address if different from pupils address **Click here to enter text**
Current/previous school Name **Click here to enter text** Address **Click here to enter text** Tel No **Click here to enter text** Date last attended **Click here to enter text** **Any other previous primary schools** Name **Click here to enter text** Address **Click here to enter text** Tel No **Click here to enter text**

Date last attended **Click here to enter text**

Has your child been **permanently excluded** from any school? YES/NO

If yes – from which school> **Click here to enter text**

When? **Click here to enter text**
Reason for exclusion **Click here to enter text**

Has your child had any **fixed term exclusions** from any school? YES/NO

If yes – from which school> **Click here to enter text**

When? **Click here to enter text**

Reason for exclusion **Click here to enter text**

Does your child have any **medical conditions or concerns** that could impact on their education? Please give details

Click here to enter text

Does your child have an **EHCP**? **Click here to enter text**

If yes, when was this put in place? **Click here to enter text**

If yes, how many hours support does your child receive? **Click here to enter text**

Is your child **new to the United Kingdom**? YES/NO

If yes: Please indicate your child's date of arrival **Click here to enter text**

Does your child speak English? YES/NO

What is your home language? **Click here to enter text**

In what country did your child last attend school? **Click here to enter text**

** If the child is an asylum seeker, please provide **a copy** of their passport or home office papers confirmation**

Siblings:

Name **Click here to enter text** Date of Birth **Click here to enter text** Year Group **Click here to enter t**

Name **Click here to enter text** Date of Birth **Click here to enter text** Year Group **Click here to enter t**

Name **Click here to enter text** Date of Birth **Click here to enter text** Year Group **Click here to enter t**

Is your child **Looked After by a Local Authority** (In Care)? YES/NO

If yes, please state which Local Authority **Click here to enter text**

Please supply the last two PEPS and any relevant SEN Information

Please indicate if any of the following agencies are now involved, or ever been involved with the family or child.

Social Services YES/NO Dates to **Click here to enter text** from **Click here enter text**

Educational psychology	YES/NO	Assessment done YES/NO
Youth offending	YES/NO	Give details
Healthy Young Minds (CAMHS)	YES/NO	Dates to **Click here to enter text** from **Click here enter text** ___
Other agencies	YES/NO	Give details

What **religion** is your child **Click here to enter text**

Ethnic Origin background, please tick

White British	_____	Pakistani	_____
White Irish	_____	Bangladeshi	_____
White traveller or Irish Heritage	_____	Other Asian background	_____
White gypsy/Roma	_____	Black Caribbean	_____
Other White Background	_____	Black African	_____
White & Black Caribbean	_____	Other Black Background	_____
White & Black African	_____	Chinese	_____
White & Asian	_____	Arabic	_____
Other mixed Background	_____	Other Ethnic Group	_____
Indian	_____	Prefer not to say	_____

Please give your reasons for wanting to transfer primary schools

Click here to enter text

If your request to transfer primary school is down to unresolved issues at the current school, please give details of attempts made to resolve these issues.

Click here to enter text

Parent details:

Mr / Mrs / Ms / Other **Click here to enter text**

First name **Click here to enter text** Surname **Click here to enter text**

Declaration: I declare that all the information I have provided is true. I accept that any place offered to my child may be withdrawn if I have used fraudulent or intentionally misleading information to gain the place.

Signed _____ **Date** _____

School Information Pack

This form must be completed and signed by the head teacher in the school that your child currently attends/ attended. Once completed, it must be returned together with the application form by the school.

Parents/carers must not complete any part of the school information pack

Student name **Click here to enter text** Date of Birth **Click here to enter text**

School Year **Click here to enter text** UPN **Click here to enter text**

For school information

Please answer all questions fully and indicate 'not applicable' where appropriate.

Once the form has been completed and signed by the head teacher, please attached relevant documents.

Exclusion record	Attached _____	Not applicable _____
EHCP	Attached _____	Not applicable _____
Latest school report	Attached _____	Not applicable _____

Were you aware of the reasons for this application to transfer primary school? YES/NO

If yes, please detail below along with details of any attempts made to resolve any issues

Click here to enter text

SEN Status EHCP _____ K _____ None _____

Date of last EHCP review **Click here to enter text**

Is there an EHFSP in place YES/NO

If yes, date commenced **Click here to enter text**

Date of next review **Click here to enter text**

Is there any external service involvement, if yes, please provide named worker and details

Youth offending YES/NO **Click here to enter text**

Educational Psychologist YES/NO **Click here to enter text**

Health Young Minds YES/NO **Click here to enter text**

Education Welfare YES/NO **Click here to enter text**

Alternative Provision YES/NO **Click here to enter text**

Is the family at Child in Need YES/NO Date of next review **Click here to enter text**

Is the family at Child Protection YES/NO Date of next core group **Click here to enter text**

Current year's attendance **Click here to enter text** %

Has there been any attendance intervention YES/NO

If yes, please give details

Click here to enter text

Has there been any behaviour intervention YES/NO

If yes, please give details

Click here to enter text

Please detail any exclusions

Permanent YES/NO Date **Click here to enter text** Reason **Click here to enter text**

Fixed YES/NO Date **Click here to enter text** Reason **Click here to enter text**

THIS FORM MUST BE SIGNED BY THE HEAD TEACHER/AUTHORISED SIGNATORY

Signed _____ Name **Click here to enter text**

Designation **Click here to enter text** Date **Click here to enter text**