

In-Year Application Form

1. Child's Details	
Surname/Family Name:	
First Name:	Middle Name(s):
Gender (please delete): Male / Fen	nale Child's Date of Birth:/
Child's Principal Home Address (full	address):
	Postcode:
Proof of address, original documents documents	s only, will need to be submitted with the application. Acceptable
 start of the academic year in which Opening accounts for public utilities Proof of payment of rent to a land! Evidence of completion of the purce For members of the UK armed force quarters. Crown Servants will need Alternatively, if you reside at the aby the person liable for Council Tarrenting the property. In this in 	nercial letting agency (the tenancy period must extend beyond the a your child starts their new school). It is such as electricity, gas or water (dated within the last 3 months). It is on a regular basis. It is an aregular basis. It is an aregular basis of a new property. It is an aregular servants, an official letter confirming the address of your is an aregular basis of your is an aregular basis. It is provide evidence that they will be residing in Royal Greenwich. It is didnered by a provide a letter signed ax. This could be because you live with family or friends, or you are instance, we require two official documents showing your name tatement, utility bill, driving licence, GP registration, benefits letter or
Date moved into this address:/	
Parent/Carer Full Name:	
Mr/Mrs/Miss/Ms/Dr/other:	
	er / Other (please specify)
Please note that if you are not the child's p	parent you must provide proof of guardianship with the application.
Home Number:	Mobile Number:
F-mail:	

2. Details of Current or Previous School	
Has your child previously attended a UK school (please delete): Yes / No	
If yes, please complete the school details below:	
Full Name of School:	
Telephone Number: E-mail:	
If this is not a Royal Borough of Greenwich School, please provide full address details:	
Last date attended:/	
THIS SECTION MUST BE COMPLETED Reason for leaving:	
3. Siblings	
Are you applying for a place for more than one child (please delete): Yes / No	
Full Name of Sibling:	
Does your child currently have a sibling on roll at The John Roan School: Yes / No	
Full Name of Student: Year Group:	

4. Looked After and Previously Looked After Children

Is your child looked after by a local authority OR previously looked after and now adopted or subject to a child arrangements or special guardianship order, immediately following having been looked after: Yes / No

If yes, you will need to provide an official letter confirming the legal status of your child.

5. New arrivals
Has your child recently arrived in the UK: Yes / No
If yes, you will need to provide a letter confirming the legal status of your child.
Date of Arrival in the UK:/ Country Child Arrived From:
Country of origin (if different):
Does your child speak English as a first or additional language: Yes / No
If no, which language does your child speak:
If you live overseas, we will process your application using your current address, until we have received satisfactory evidence of your relocation date and UK address.
6. Medical or Social Reasons
Is it your view that there is a chronic or acute medical or social care reason why your child should be offered a particular school: Yes / No
If yes, you will need to provide:
 Evidence of the chronic or acute medical condition/social care need AND Demonstrate why the school is the most suitable for your child and the implications if your application is not successful AND Provide supporting evidence from the relevant professional for a named school
Please specify the medical need:
Is your family currently known to social services or other external services: Yes / No
Please state the name of any professional working with the family, e.g. Social worker/FaASS workers

Note: Work commitments, childcare arrangements and moderate learning difficulties are not considered as being a chronic or acute medical or social care need.

7. SEND Information
Does your child have a diagnosis of SEND: Yes / No
Does your child have an EHCP: Yes / No
Please specify all SEND needs
8. Additional Information
Has your child ever been permanently excluded during their educational history or is at risk of
permanent exclusion from school: Yes / No
Please give details:
Has your child received a fixed period suspension from school during the last 12 months: Yes / No
Has your child ever been placed at an Alternative Provision Centre: Yes / No (please give details)
In the last 12 months, has your child's attendance dropped below 90%: Yes / No
Does your child require additional support within school? (this may include mentoring, counselling, SEND support etc): Yes / No
You have recently moved address: Yes / No
If yes, please give your previous address:

There has been a change in parental responsibility or guardianship.
Please give details:
You have not moved to a new house but wish to transfer your child to another local school. Please give the reasons why you are requesting a transfer:
9. Declaration Please read this Declaration very carefully. By signing this in-year application form, you are confirming and
consenting to the following:
 I certify that I am the person with parental responsibility for the child named and that the information given is true to the best of my knowledge and belief. I understand that any false or deliberately misleading information given on this form and/or supporting papers, or any relevant information withheld, may render this application invalid and could lead to the withdrawal of an offer of an in-year school place for my child. I agree that The John Roan School will use the information I have provided to process my application. When processing the application, the school will share the information with other third-party organisations i.e. the previous school and the maintaining local authorities for those schools. I agree that the school may contact my child's previous school to obtain information in the form of a School Report in order to best meet my child's needs or determine whether this application meets Fair Access Criteria. I agree that where this application meets the Fair Access criteria and is referred to the Fair Access Panel, the Admissions Service will obtain reports held by other third-party organisations in order to understand what support my child needs and how well a setting is able to meet those needs. These include GP and health services, my child's previous nursery or school, Children's Social Care, other Royal Greenwich Services, CAMHS or other therapeutic services and Youth Offending Service.
Full name of Parent/Carer:
Signature of Parent/Carer: Date: Information supplied will be used for registered purposes under the General Data Protection Regulation 2018.

Completed forms should be returned, along with all original documentary proof, to: Admissions at

The John Roan School Westcombe Park Road London SE3 7QR

For further information, contact our Admissions Team on admissions@thejohnroanschool.org.uk.

Data Sharing

The information provided to The John Roan School will be used to process your child's school admission. We may share the information with third parties such as Royal Borough of Greenwich Council departments, Government departments or other local authorities. For further information on data sharing, and our full Privacy Policy, please visit our website.

Data Controlle

The Data Controller for personal information held by the Group's Academies is United Learning Trust (ULT). ULT is registered with the ICO under registration number Z7415170. The Company Secretary, Alison Hussain, is responsible for ensuring that the group complies with the Data Protection Law. She can be contacted on company.secretary@unitedlearning.org.uk or 01832 864538.