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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Logo, company name  Description automatically generated | **MANOR DRIVE SECONDARY ACADEMY**  **Porter Avenue, Peterborough, PE4 7EP**  [**www.manordrivesecondary.org**](http://www.manordrivesecondary.org)**.uk /** [**office@manordrivesecondary.org**](mailto:office@manordrivesecondary.org)**.uk**  **STUDENT ADMISSION**  **IN YEAR APPLICATION FORM** | | | | | | | | | | | | | | | | Logo, company name  Description automatically generated |
| **Name of student:** | | | |  | | | | | | **Male** | |  | | | **Female** | |  |
| **Date of Birth:** | | | |  | | | | | | **Year Group:** | | | | |  | | |
| **Name of Parents/Carers:** | | | | |  | | | | | | | | | | | | |
| **Child’s Address:**  (the address they spend the majority of their time living) | | | | |  | | | | | | | | | | | | |
|  | | | | | **Post Code:** | | |  | | | | |
| **Telephone Numbers:** Home: | | | | | | |  | | | Mobile: | | |  | | | | |
| **Email Address:** | | |  | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | |
| * *I enclose two documents which confirm my residency at this address eg: council tax / utility bill. If about to move house, I enclose relevant documents to confirm the move, eg solicitor’s / estate agent’s / council paperwork* | | | | | | | | | | | | | | | | | |
| Does your child have an Education Health Care Plan (EHCP)? *If in doubt, please speak with your child’s current class teacher* | | | | | | | | | * Yes | | | | | * No | | | |
|  | | | | | | | | | | | | | | | | | |
| Is your child under the care of the Local Authority? | | | | | | | | | * Yes | | | | | * No | | | |
| **Present school** (name and address) | | | | | |  | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | |
| Telephone number: | | | | | |  | | | | | | | | | | | |
| Leaving date from current school if applicable: | | | | | | | |  | | | | | | | | | |
| **Sibling(s) at Manor Drive Secondary Academy** (brothers or sisters currently at the school) | | | | | | | | | | | | | | | | | |
| Name: | |  | | | | | | Year Group: |  | | | | | | | | |
|  | |  | | | | | |  |  | | | | | | | | |
| **Reason for application:** | | | | | |  | | | | | | | | | | | |
| *(please provide as much information as possible about the change of school application)* | | | | | | | | | | | | | | | | | |
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| **Fair Access Questions:**  We would like to ensure that children without a school place are found a suitable school as quickly as possible in accordance with the Local Authority’s Fair Access Policy. **Please tick any box that applies to your child and provide written evidence with your completed application form.** If an offer of a school place is made and it is found that these questions have not been answered truthfully, the place may be withdrawn: | | | | | | | | | | | | | | | | | |
| **Your child has been subject to a Managed Move** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is returning from the Criminal Justice system** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child has been previously permanently excluded** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is known to the Police or any other agencies** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is currently attending a Pupil Referral Unit (PRU)** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is currently attending a PRU and is now needing to reintegrate back into mainstream education** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child has an annual attendance of less than 70% or legal action has been taken for non-school attendance** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is at risk of being permanently excluded** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child has been out of education for two months or more** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is of Gypsy, Roma or Traveller community** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is a refugee or asylum seeker** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is homeless** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child has special educational needs (SEN) but DOES NOT have an Education, Health and Care Plan (EHCP)** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child has a disability or medical impairment that has a substantial and long-term effect on their ability to carry out normal day to day activities** | | | | | | | | | | | * **Yes** | | | | | * **No** | |
| **Your child is a carer** | | | | | | | | | | | * **Yes** | | | | | * **No** | |

|  |
| --- |
| ***Declaration by Parent / Carer:*** *I declare that all the information in this application form is correct. I understand if I make a false declaration the place could be withdrawn and / or legal action may be taken* |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Signed:  Parent 1 |  | Print Name: |  | Relationship  to child: |  | Date: |  |
| Signed:  Parents 2 |  | Print Name: |  | Relationship  to child: |  | Date: |  |

*Please return this completed form to Mrs P Noble (Admissions),*

*Manor Drive Secondary Academy, Porter Avenue, Peterborough, PE4 7EP*