



Secondary school application for in-year admission or transfer (icaf)

This form should be completed by parents living in Lewisham and applying for a secondary school place in Lewisham or outside Lewisham. Please read the guidance notes carefully before completing the form.

Completed forms must be returned to the:

School Admissions Team, 3rd Floor Laurence House, 1 Catford Road SE6 4RU

Do not complete this form if your child has a Statement of Special Educational Needs.

1 Child's details

Child's surname _____

First name(s) _____

Date of birth _____ Gender (please circle) **male** **female**

Year group _____

Child's permanent home address _____

_____. Postcode _____

This must be the address where the child normally lives. If parents share custody, the permanent home address will be considered as that of the parent who is in receipt of benefit(s) for the child.

2 Parents'/carers' details

Parent/carer 1 with parental responsibility with whom the child lives permanently

Title _____ First name _____ Surname _____

Home tel no _____ Mobile tel no _____

Work tel no _____ Email address _____

Relationship to child: Mother ☐ Father ☐ Step Parent ☐ Foster Parent ☐ Social Worker ☐

Other ☐ please specify _____

Parent/carer 2 with parental responsibility with whom the child lives permanently

Title _____ First name _____ Surname _____

Home tel no _____ Mobile tel no _____

Work tel no _____ Email address _____

Relationship to child: Mother ☐ Father ☐ Step Parent ☐ Foster Parent ☐ Social Worker ☐

Other ☐ please specify _____

3 Child's education details

Name and address of current or last school attended

Postcode

Lewisham will normally seek further information from the previous school to assist the transfer process

Reasons for requesting a school place in Lewisham

[illegible]

Not on a school roll because: (tick box)

- ☐ New arrival from another area within UK
(specify borough/town/county) _____
- ☐ Permanent exclusion from (specify school name) _____
- ☐ Registered as elective home educated

4 Children who are newly arrived in the UK

Date of arrival in the UK _____

Country child arrived from _____

Country of origin (if different) _____

Status in the UK (Please provide a copy of the visa in the child's passport) _____

Does this child speak English **Yes** **No** (please circle)

If **NO** what language does the child speak _____

5 Secondary school preferences

Please write the name of up to three secondary schools for which you wish to apply. You must list the schools in the order you prefer them. You must include all maintained schools including academies (not private/independent schools) for which you are applying, including any schools which are outside the borough of Lewisham. Your application details will be forwarded to the relevant local authority. Please include the address of each school, the borough or county in which it is located and the name and date of birth of any brother or sister who is already attending the school you are applying for.

You may include reasons for your preference including religious, philosophical, medical, social or any other reasons. If you are claiming a place on medical or social grounds you must provide professionally supported evidence with this application demonstrating why this particular school can meet the child's/family's needs. It is important that you check the admissions criteria for the school to see if priority on these grounds will be considered.

A	B	C
Name and address of secondary school	First name, surname, gender and date of birth of any sibling (brother or sister) already attending the school	Reason for preferences Priority under exceptional medical or social grounds will only be considered for the schools that have this priority if supporting documents from a hospital consultant, social worker or other equivalent professional are attached to support your application
1st preference	First name	<input type="checkbox"/> Tick box if documents are attached for medical/social reasons. Other reasons:
	Surname	
	Date of birthMale Female (please circle)	
2nd preference	First name	<input type="checkbox"/> Tick box if documents are attached for medical/social reasons. Other reasons:
	Surname	
	Date of birthMale Female (please circle)	
3rd preference	First name	<input type="checkbox"/> Tick box if documents are attached for medical/social reasons. Other reasons:
	Surname	
	Date of birthMale Female (please circle)	

Please note: Most voluntary aided schools and academies require you to complete a supplementary information form (SIF). Please see the Guidance notes.

6 Children in care

Is the child in care? Yes No (please circle)

If yes, please state which local authority _____

Name of social worker _____ tel no _____

If yes, you must provide a letter from a social worker confirming the legal status of the child and the local authority with whom the child is in care.

7 Declaration and signature of parent/carer

I wish to apply for a place at each of the schools named in Section 5 and I have listed these schools in my order of preference.

I certify that I am the person with parental responsibility for this child who lives permanently in the borough of Lewisham.

I certify that the information I have given is true and complete. I authorise the London Borough of Lewisham to check the details I have supplied against any records held within the Council and by other agencies including local authorities. I understand that any false or deliberately misleading information given on this form and/or supporting information may render this application invalid, or lead to the offer of a place being withdrawn.

Admissions checklist

Before returning this form, please ensure that you have:

- ☐ enclosed a copy of your Council Tax bill as proof of address
- ☐ enclosed a letter from the Child Benefit Agency as proof of your child's date of birth and the name of the adult who is in receipt of this benefit
- ☐ enclosed supporting evidence, if applicable (e.g. a letter from a hospital consultant, social worker or equivalent professional in support of any medical or social claim)
- ☐ completed a supplementary form for any voluntary aided schools or academies and sent the form directly to the school(s) concerned.

Parent/Carer signature _____ Date _____

Data Protection Act 1998. This Authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form within this Authority for the prevention and detection of fraud. It may also share this information with other bodies solely for this purpose. Information supplied will be used for registered purposes under the Data Protection Act 1998.

The completed form should be returned to:

School Admissions Team, 3rd Floor Laurence House, 1 Catford Road, SE6 4RU

For help and advice please contact the School Admissions Team on 020 8314 8282.

Guidance notes for parents who are applying for an in-year admission to a secondary school

Please complete all sections of the 'Secondary school application for in-year admission or transfer' form (ICAF). Failure to do so may delay your child's admission to school.

Parent/carer details

To establish the child's permanent home address you are required to provide your current council tax statement and a letter from the Child Benefit Agency or a residence order.

Lewisham is aware that some parents share the care of their child. Lewisham will normally accept that the child lives with the parent who has parental responsibility and is in receipt of child benefit and child tax credit. Documentary evidence may be required.

Lewisham may withdraw an offer of a place if false or misleading information has been provided.

Secondary school preferences

You are entitled to name up to three secondary schools including those in local authorities outside Lewisham.

Sibling criterion – It is important that you state if your child has a brother or sister (including step or foster siblings) already attending your preferred school. A sibling must be living at the same address as the applicant.

Medical/social reasons – Some schools give special consideration to children where the child or a family member have an exceptional medical or social need for a place at a particular school. You will need to provide professionally supported documentation demonstrating why the school is the only one to meet the child's specific needs. Please see admissions checklist below. Attach this supporting evidence to your application.

Supplementary Information Forms (SIF) – Most voluntary aided schools and academies require you to complete a SIF. The SIFs are available from Lewisham's web site at www.lewisham.gov.uk, the school's website or directly from the school. Information about schools outside Lewisham which require the completion of a SIF will be available from the local authority for the school.

Children in public care – Please indicate on the ICAF if you are a foster carer looking after the child and attach a letter from the social worker confirming the legal status of the child and the local authority with whom the child is in care.

Admissions checklist

Before returning this form, please ensure that you have:

- ☐ enclosed a copy of your Council Tax bill as proof of address
- ☐ enclosed a letter from the Child Benefit Agency as proof of your child's date of birth and the name of the adult who is in receipt of this benefit
- ☐ enclosed supporting evidence, if applicable (e.g. a letter from a hospital consultant, social worker or equivalent professional in support of any medical or social claim)
- ☐ completed a supplementary information form for any voluntary aided schools or academies and sent the form directly to the school(s) concerned.

Outcome of application

All your preferences will be considered at the same time, regardless of how you have ranked them. A letter will be sent within 20 school days of the date we received your application to let you know the outcome.

If you are not offered a place at any of the schools you have named on your form and your child is not already on the roll of a school, you will be offered a place at an alternative school where there is a vacancy. Once a place is offered your child's name will be removed from the list for other schools unless you request that your child's name remain on the list. Waiting lists are held until the end of the academic year. You will need to make a new application for the following academic year.

Voluntary aided schools and academies in Lewisham operate separate admissions criteria as will schools located outside of Lewisham. You are advised to consider the admissions policies of these schools before you complete the ICAF.

Timing of admission

In cases of school transfers that do not involve a house move or where there is no need for an immediate change of school, admission authorities may arrange for the child to start at the school at the beginning of term to minimise disruption to their own and other children's education.

Lewisham's determined arrangements for in-year admissions to Lewisham community schools

Applications for places at a Lewisham community primary or secondary schools in a year group other than the normal year of entry to primary (Reception Class to Year 6) and secondary school (Year 7 to Year 11) will be treated as an in-year admission. These applications should be made on an In-year Admission Common Application Form (ICAF).

In the case of oversubscription for a community school in Lewisham, places will be offered to children in the following order:

- a)** children who are in public care;
- b)** children who are newly arrived in the borough and do not have a school place and have not been offered an alternative school place within a reasonable distance from the family home (i.e. 2 miles for children in Key Stage 1 and 3 miles for children in Key Stages 2, 3 and 4);
- c)** children with exceptional social and medical need, as verified by professional documentation;
- d)** siblings of children already on the roll of the school;
- e)** children who live nearest the school, the distance being measured in a straight line.