REQUEST TO START SCHOOL OUT OF THE CHRONOLOGICAL AGE GROUP

This form should only be used by those parents/carers requesting their child starts school in Reception, a full year behind their chronological age group. You should read the document ‘[Summer Born Children – Starting School: Advice for parents](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/921255/Guidance_for_parents_September_2020.pdf)’ before submitting this request.

Those applying for deferred entry or an in-year admission outside the normal year group should follow the process outlined in the Admissions & Appeals Policy.

Parents should be aware that:

* Consideration of the request may be delayed unless this request and the supporting documents are received by the time of the primary school application deadline (15th January).
* The child may only be offset with the agreement of the Governing Body (the admission authority) for this Academy. You will also need to make applications to the local authority (for schools for whom they are the admission authority) and/or the admission authorities for any other schools you are applying to.
* If agreed, the child will usually remain offset throughout their educational career and the transfer to secondary school will take place a year later, however, you may need to make an application in Year 5 to a local authority or the admissions authority of a different school, as they may not agree with the decision made by the Governing Body. The same will apply if you move house mid-way through your child’s education and you apply to other local authorities or admission authorities.
* Should agreement not be given, and you still choose to offset entry, you will need to apply for a place in Year 1; this application will need to be made in June (i.e. prior to the start of the academic year in late August). Allocation will be dependent upon a place being available at the time of application and your child qualifying for a place following application of the oversubscription criteria.

PART 1

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s details** | | | |  | |
| Forename/s: | |  | | | |
| Surname: | |  | | | |
| Date of birth: | |  | | | |
|  | | | |  | |
| **Parent’s / Carer’s details** | | | | | |
| Mr / Mrs / Ms / Miss / Other (please state or delete as appropriate) | | | | | |
| Forename: |  | | | Surname: |  |
| Child’s address: | | | | Your address (if different to the child’s): | |
|  | | | |  | |
|  | | | |  | |
|  | | | |  | |
| Postcode: |  | | | Postcode: |  |
| Contact number: | | |  | | |
| E-mail address: | | |  | | |

Please turn over

**PART 2**

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| **Reasons for request. Please state these as fully as possible in the space below and attach separate sheets if necessary.** |
|  |
| **Who is supporting the request (tick all that apply)?**   |  |  | | --- | --- | | Paediatrician |  | | Educational Psychologist |  | | Specialist Teacher |  | | Speech therapist |  | | Head Teacher / nursery teacher |  | | Other - please specify the occupation or relationship to the child: |  | |
| **Please list below the supporting documents you are including with this application:**   |  |  | | --- | --- | |  |  | |  |  | |  |  | |  |  | |

This form and information will be shared with the local authority who allocate places at the Academy.

Please return the form and supporting documents by:

E-mail: [info@dixonstc.com](mailto:info@dixonstc.com) Please type in the subject line ‘FAO Admissions Officer’

Post: FAO Admissions Officer, Dixons Trinity Chapeltown, Leopold Street, Chapeltown, Leeds, LS7 4AW