



**St Antony's
Roman Catholic School**

ASPIRE + BELIEVE + ACHIEVE

IN-YEAR ADMISSIONS ADDITIONAL INFORMATION - FORM A

Please ask an appropriate member of staff from your child's current school, for example Head of Year/Form Tutor to complete and sign this form and return it with the COMPLETED application form.

Personal Details			
Surname		Current school	
First names		Date of Birth	

Attendance			
Attendance (%)		Period covered	
Punctuality	Good/average/poor	EWO involvement?	Yes/No

Special Needs			
EHCP	Yes/No	IEP	Yes/No
On SEND register	Yes/No	Registered disabled	Yes/No

Applications for Yr7&8 - KS2 scaled score in:		Applications for Yr9-11 - KS2 level in:	
Maths		Maths	
Reading		English	
GPVS			

For all applications (please tick relevant box)			
Current position	Below expectation	On	Above
Maths			
English			

Is the pupil a Young Carer?	Yes/No
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Other agencies involved (please tick) (please attach reports and/or provide details on an additional sheet)	
Educational Psychologist Service	Social Worker
Behaviour Support Team	Refugee & Traveler Team
Home/Hospital Education	Looked After Team
Minority Ethnic Curriculum Support Service	Other – please state
Pastoral Support Plan (Dates and comments)	
Fixed term exclusions (Dates and details – a print off from the MIS system would be most helpful)	
<i>To be completed by your child's current school.</i> Please add any other comments you think we may find helpful to enable a successful transition into a new school:	



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To help this child's future school easily discuss the above, please give full contact details below. Thank you for your help in completing this form	
Name	Tel number (incl. extension)
Role	Email
Signature of school representative:	
Date:	