

ORESTON COMMUNITY ACADEMY

In-Year Admissions Application Form 2018-19



Please complete this form if you would like to apply for admission after the normal round of admissions to Foundation or to any other Year Group.

If you wish to express a preference for other schools as well as Oreston, you may wish to apply using Plymouth's In-Year Admission Form, on which you can express up to 3 preferences for a school. The decision whether a place can be made available is taken in the same way whether this form or the Local Authority form is used.

Please read the admissions policy, including definitions, before completing this form.

To be completed by the parent			
Full Name of child			
Date of birth		Year Group:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Home address (this must be the address where your child is normally resident. Evidence of address may be required)			
Post code			
Does this child have an Education, Health or Care Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No	Current or most recent school or education provision:		
Is this child in the Care of a Local Authority or was this Child in Care until adopted, made the subject of a child arrangements order or made the subject of a special guardianship order. <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please give details		
Is this child the child of a member of staff employed by the academy trust? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please name the member of staff		

Does this child have a brother or sister attending the academy? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please give details of the name and date of birth
When would you like this child to be admitted?	Date
Are there any reasons for your preference for admission to Oreston Academy	
Your name: Mr / Mrs / Ms / Miss / Dr / other	Relation to the child
Your address (if different to the child's address)	
	Post code
Daytime telephone number	
Your email address	
Do you have parental responsibility for the child? (If you do not have parental responsibility, you cannot apply for admission) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is there another person or body who may legally object to this application? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please give details
Is there a court order in relation to this child? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please give details
I confirm that the details in this application are accurate. I understand that if this application is unsuccessful, I may approach Plymouth City Council to seek an alternative school place.	
Privacy and Data Protection:	
Your personal data is being used by The School and Devon County Council's Admissions Service for the purposes of an application for admission to school. We undertake to ensure your personal data will only be used in accordance with our privacy notice which can be accessed at http://devon.cc/admisisonsgdpr . Please confirm that you give your consent to the School and Council using your personal data as outlined in our privacy notice, by signing below. You have the right to withdraw your consent at any time. Should you wish to withdraw consent, please contact the Admissions Team at admissions@devon.gov.uk or 0345 115 1019. If you wish to exercise any of your rights under the General Data Protection Regulations, please contact the Council's Data Protection Officer at 01392 383000 or at: accesstoinformationsecure@devon.gcsx.gov.uk . For more information about Data protection, please contact the School or visit https://new.devon.gov.uk/accesstoinformation/data-protection .	
Signature	Date

Please return this form to: **Admissions Officer, Oreston Community Academy, 27 Oreston Road, Plymstock, Plymouth PL9 7JY**