



# Knutsford Primary Academy



## Knutsford Primary Academy Application Form In Year Admissions Additional Information – Part A

**This part of the application must be completed by your child's current school.**

**A completed form is required for us to consider your application.**

**It also acts as confirmation that your child's current school is aware of your intention to move schools.**

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

## Child's details

First name	Middle name(s)	Family name/Surname
Date of birth	Year Group	School

Attendance Information	Authorised Absences		Unauthorised Absences	
	Number	%	Number	%
Current Academic Year				
Previous Academic Year				
Punctuality	Good/average/poor		AIO Involved?	Yes/No

Attainment (National Curriculum Levels)					
Key Stage 1			Key Stage 2		
Current	Potential	Level Achieved	Current	Potential	Level Achieved
Ma:	Ma:	Ma:	Ma:	Ma:	Ma:
En:	En:	En:	En:	En:	En:
Sci:	Sci:	Sci:	Sci:	Sci:	Sci:
End of KS1 phonics screening score:			Reading age:		

Attainment (Early Years Outcome)						
CL	PD	PSED	L	M	UW	EAD

## About the child

Does this child qualify for free school meals?

Yes  No

Is this child on the SEN register?

Yes  No

If yes, please specify School Action/School Action + / Statement / Exceptional Needs Funding

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If the child is on the SEN Register, what are the main presenting needs?

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Has this child had a Pastoral Support Plan? If so, please enclose with this form.

Have any of the following agencies been involved with this child? (Please tick those that apply)

- |                          |  |                          |                            |
|--------------------------|--|--------------------------|----------------------------|
| <input type="checkbox"/> | Pupil Referral Unit/Educational Support Centre | <input type="checkbox"/> | Respite                    |
| <input type="checkbox"/> | School Inclusion Centre                        | <input type="checkbox"/> | Counselling                |
| <input type="checkbox"/> | CAMHS  | <input type="checkbox"/> | TA/LSA Support             |
| <input type="checkbox"/> | PSP  | <input type="checkbox"/> | Social Care                |
| <input type="checkbox"/> | TYS  | <input type="checkbox"/> | Educational Psychologist   |
| <input type="checkbox"/> | Youth Connexions                               | <input type="checkbox"/> | Integration Team           |
| <input type="checkbox"/> | CAF  | <input type="checkbox"/> | Refugee and Traveller Team |
| <input type="checkbox"/> | TAC  | <input type="checkbox"/> | Children Looked After      |
| <input type="checkbox"/> | Social Worker                                  | <input type="checkbox"/> | Child Protection           |
| <input type="checkbox"/> | IEP  | <input type="checkbox"/> | IBP                        |
| <input type="checkbox"/> | ADD-Vance                                      | <input type="checkbox"/> | Risk Assessment (RAMP)     |
| <input type="checkbox"/> | Family Worker                                  | <input type="checkbox"/> | Parent Partnership         |
| <input type="checkbox"/> | Attendance Improvement Officer                 | <input type="checkbox"/> | Thriving Families          |
| <input type="checkbox"/> | School Nurse                                   |                          |                            |

Please provide details of any Fixed Term Exclusions (if applicable) below:-

Start date	No. of days	Reason

## Any further information

Please comment on:

Any significant medical issues
Relationships with staff and other pupils
Family background issues and home school relationships
Behaviour
Any further information which may be useful when trying to place this pupil into educational provision, (including positive comments)

Name and signature of School representative:	Date:
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Please return this Part A additional information form to the office of:  
Knutsford Primary Academy  
Balmoral Road  
Watford  
WD24 7ER