

Application for In-Year Admission

For admissions to school once the Year Group has begun. For use only if your child lives in the Devon LA area and you have a preference for a single school which has a confirmed vacancy.



This form should be completed where both the school and School Admissions confirm that a place is available and you only have one preference for admission for your child (or children) after a move to the area. It should NOT be used if you want to transfer from one local school to another, a child has a disability or Statement of SEN or is being assessed for a Statement, has been Permanently Excluded or where another person has a legal objection to the application. In any of those circumstance, a D-CAF should be completed – available at www.devon.gov.uk/admissions or by calling 0845 155 1019.

Section 1 – About your child (or children) *please mark a cross in boxes where appropriate.							
1. Legal Forename (and	2. Legal Surname (and preferre				5. Year		
preferred name if different)	name if different)				Group		
6. Is your child (or any of your children) in Care or were they formerly in Care?] *Yes		
If yes, please give details, including contact details for a social care officer:					1		
					No		
7. Does your child (or any of your children) have a Disability or Statement of Special Educational							
Needs or is your child under a statutory assessment for a Statement?					*Yes		
If yes, please complete a D-CAF and not this D-CAF6 for that child (or children):					No		
8. Has your child (or any of your children) been Permanently Excluded from school or academy?							
If yes, please complete a D-CAF and not this D-CAF6 for that child (or children)					*Yes		
] No		
9. Is your child (or any of you	r children) on roll at another local st	ate-funded school or a	academy?		*Yes		
If yes, please complete a D-CAF and not this D-CAF6 for that child (or children)							
No					No		
10. Home address including postcode:							
11. Current or most recent school(s) or form of education:							
12. Contact name and number for each school named:							
Section 2 – About you		45.0					
13. Your title:	14. Forename:	15. Surname:					
16. Your home address if different to your child:		17. Daytime Telepho	one:				
	18. Mobile:						

19. Email address:						
20. Relationship to the child (or children) named i	n Section 1?					
21. Do you have parental responsibility for this ch		*Yes				
We will not accept an application from you unl	ess you hold parental responsibility.					
		No No				
22. Is there anybody else who may have a legal ol If yes, please complete a D-CAF and not this D-CA		Yes				
If yes, please complete a D-CAF and not this D-CA	a o for that child (or children).	🔲 No				
Section 3 – About the school you pref	er					
22. Name of School						
23. Preferred start date at this school?						
Section 4 – About the reasons for you	r preference					
24. If you are applying for a school place because		ot have access to a				
school place within a reasonable distance, please tell us the previous home address:						
25. Date of move:						
Section 5 – Declaration						
Data Protection. The Information collected on this for	m will be processed and stored electronically by Devo	n County Council in				
compliance with the UK Data Protection Act. The Dat only for administrative or other service provision purpor						
so. In accordance with the School Admissions Code, sh						
place can be withdrawn. For further information abo	ut Data Protection, please see www.devon.gov.uk /	/data_protection or				
contact the Corporate Information Governance Team that you have read, understand and agree to this data		m you acknowledge				
that you have read, understand and agree to this data	processing.					
I understand that I could express up to 3 prefe						
applying for this school. My child (or children) do not been Permanently Excluded from school and						
I am applying for a place at this school because						
funded school and requires admission as soon as	possible. I understand that a place is available. T	The information on				
this form is provided so that a formal offer letter	can be issued and so that the Local Authority is	made aware of my				
child's arrangements for education. I confirm that the details in this application are ac	curate.					
I understand that I must inform the school or Adm	issions if my child or children's address changes b					
I understand that transport to a school I prefer which is neither designated for my child's address nor the nearest						
available school, whether in Devon or a neighbouring county, may be my responsibility. I have read the information regarding transport eligibility, including exceptions to designated area transport eligibility, at						
www.devon.gov.uk/school_transport						
I understand that it is my responsibility to complete a school Test Registration or Supplementary Information Form or						
provide a letter from a priest or church minister w	here this is relevant to my application. one signature is required.					
We encourage both parents to discuss and to be in agreement over applications.						
My Name	Signature					
Date						
My Name	Signature					
Date						
Email to admissions@devon.gov.uk or post to S o or fax to 01392 383614 or hand it in to the school.	chool Admissions Team, One Capital Court, Sowto	on, Exeter EX2 7FW				