



Placing Request

Parent / Carer's Details

Title: Mr / Mrs / Miss / Ms /Dr (Please delete as appropriate)	Surname	Forename (s)
Home Address		Telephone Number
		E-mail
Postcode	<input type="text"/>	

Child's Details

Surname	Forename (s)
Sex: Male / Female (please delete as appropriate)	Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>

Please give details of the school your child presently attends or at which he/she is registered for admission

Name of School	
Address	

If your child is already at school, please indicate his/her class or stage.

Class / Stage	
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Catchment School for your address

Name of School	
Address	

School requested - School to which placing request is sought.

Name of School	
Address	

Anticipated starting date in requested school	
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Details of Request - The guidelines used in reaching decisions on placing requests can be found on:

<http://www.north-ayrshire.gov.uk/EducationAndLearning/Schools/SchoolAndNurseryPlaces/PlacingRequests.aspx>

<http://www.north-ayrshire.gov.uk/EducationAndLearning/Schools/SchoolAndNurseryPlaces/PrimarySchoolPlaces.aspx>

Thereafter, where there are more placing requests for Primary or Secondary school than there are places available, priority will be given to Medical and Siblings;

<input type="checkbox"/> Medical Condition - please state these cases where medical grounds supported by the family doctor and community medicine specialist, clearly indicate the benefits to the child attending the specified school;	
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<input type="checkbox"/> Siblings - please state then those children who have older brothers or sisters who are continuing their education in the specified school.	
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Where no priority in terms of the above are identified the Council have agreed that the only reasonable solution is to draw lots. This will be done by a senior member of Education and Skills accompanied by a Councillor.

DECLARATION

I have read and understood that the Education Authority does not provide transport for those pupils in receipt of a placing request other than in exceptional circumstances.

Signature of Parent/Carer		Date	___/___/___
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Please read the two statements below, delete whichever one does not apply and sign below.

A I agree that, if granted this placing request will take effect at the start of next session.

or

B Having considered the education advice against mid-session transfers/admission, I wish this placing request, if granted, to take effect at the first available opportunity.

Signature of Parent/Carer		Date	___/___/___
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To: North Ayrshire Council, Education and Skills, Cunninghame House, Irvine, KA12 8EE