ADMINISTRATION CHECKLIST (FOR SCHOOL OFFICE USE)

Pupil ID Number:

Proof			Checked By?	Date	
Permanent Address confirmed	Yes	No			
Full Birth Certificate / TCAN / Child Benefit	Yes	No			
RC only: Baptismal Certificate	Yes	No			

Confirmation of Parent/Carer's Right to Enrol			Checked By?	Date
Is parent applying? Yes No				
If not parent, does applicant have proof of legal yes guardianship?		No		
If no proof of legal guardianship, what proof is there that applicant is child's carer?				
If no proof is available, contact ERW/SFDW/Social Work to confirm status. Person confirming Applicant's Status:				

Additional Steps

For any of the following circumstances, please send a scanned copy of the Placing Request form to the relevant contact:

Circumstance	Contact	Contacted by?	Date
ASN arriving from	Education Support Officer ASN		
outwith Dundee			
Arriving from	Principal Officer (John Lannon)		
outwith Dundee			
Looked After,	Education Support Officer ASN and DEPS		
arriving from	and Link Education Officer		
outwith Dundee			
On Child Protection	Officer for Child Protection (John Lannon)		
Register			
Child's Main	Accessibility and Inclusion Service –		
Language is not	Bilingual Support		
English			

Progress of Application							Completed By?	Date
Priority	1	2	3	4	5	6		
Entered onto Seemis	Entered onto Seemis							
Check School Roll for space a	t rele	vant s	tage					
Head Teacher - contact previous school for relevant information.								
If Head Teacher agrees reque	If Head Teacher agrees request - issue Agree Letter							
If Head Teacher recommends refusal – email to Education Officer								
and update Seemis to 'Under Consideration'								
AIS informed of outcome of request, if applicable.								
Enrolled								
Withdrawn								
Additional Notes:								

Dunder Martine CHANGE ROUTURE	Children and

SCHOOL PLACING REQUEST

I wish to make a Placing Request in respect of:

Child's Surname: _____

Child's Forename(s):

Male Female

Name of School in which you are requesting a place: _____

Present School Stage: _____

1a. Does your child require any additional support with the that is different from the support other children receive?

1b. Does you child have any additional needs as a result or disability or illness?

1c. Please provide details of any additional support needs

2a.Has a Children's Hearing decided that your child is Loo

2b. Has a Children's Hearing decided that your child is Loc

2c. If you answered Yes to 2a or 2b, which Local Authority

3a. Is your child on the Child Protection Register?

3b. If you answered Yes to 3a, pleased give the name of the second secon



ige)				
neir learning	Vaa	Nia		
	Yes	NO		
of an assessed	Yes	No		
s / assessed disa	bility: _			
ked After at hor	ne?		Yes	No
oked After away	from h	ome?	Yes	No
y has responsib	ility for	your ch	ild?	
Yes	No			
the lead Social Worker and their contact details.				

	Name of Parent / Carer:
4a. What is your child's main language?	Date of Birth:
4b. Does your child speak any other languages?	Nationality:
5a. Is there a professional whom we need to contact about this application? Yes No	Relationship to Child:
5b. If yes, Name and Contact Details of the professional:	Postcode
6. Please list the full name of any sibling/relatives who have been living as part of the family for at least 2 years at the same address and who are attending the school for which you are making a Placing Request. For P1 requests, the sibling/relative must be in P1-P6 and for new S1 requests, the sibling/relative must be in S1-S5	Telephone Number: DECLARATION: • I declare that the information I have given on this form is correct and complete.
For pupils arriving from outwith Dundee, please provide this information about your child's most recently attended school:	 I understand that Dundee City Council will check the information I have given on this application. I understand that if I give false information or withhold information my placing application may be cancelled and, if necessary, further action will be taken against me, which may include
School Name:	prosecution.I understand that relevant information may be passed on to third parties within the Local
School Address:	Authority
School Telephone Number:	 I understand that I will be responsible for the arrangement and cost of transport for the pupil to and from school.
School Email Address:	
Contact Name:	Signature of Parent/Carer:
	Date:

GENERAL DATA PROTECTION REGULATIONS 2018

Privacy Statement

In order for us to provide services to you as a Local Authority, we need you to give us your personal information. To deliver our services, to meet our legal obligations and protect public funds we need to collect, store, use, share and dispose of personal information. This is known as data processing. We also use your information to verify your identity where required, contact you by post, email or telephone and to maintain our records.

We collect and use different categories of personal information, depending on the service we provide to you. Further details on how we use your data with this form can be found on our website www.dundeecity.gov.uk/service-area/chief-executive/chief-executives-services/privacy-statement. Alternatively ask the school for a copy.