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

Is parent applying?	Yes	No
If not parent, does applicant have proof of legal guardianship?	Yes	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	Confirmed by:	Date:
status.		

Additional Steps

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

Circumstance	Contact	Contacted By	Date
Additional Support Needs arriving from outwith Dundee	Education Support Officer (ASN)		
Looked After and arriving from outwith	Education Support Officer (ASN) DEPS Link Education Officer		
On Child Protection Register	Principal Education Officer (John Lannon)		
Child's Main Language is not English	Accessibility and Inclusion Service - Bilingual Pupil Support Team		

Progress of Application

							Completed by	Date	
Priority	1	2	3	4	5	6			
Entered onto Seemis									
Check School Roll for space at relevant stage									
Head Teacher - contact previous so	chool	for rele	vant	informa	ation.				
If Head Teacher agrees request: is:	sue Ag	ree Le	tter						
If Head Teacher recommends refusal: email to Education Officer and record as 'Under Consideration' on Seemis.									
Enrolled									
Withdrawn									
Any Additional Notes:									



SCHOOL PLACING REQUEST

I wish to make a Pla	cing Request in respect of:					
Child's Surname:						<u>—</u>
Child's Forename(s)	;					
Child's Date of Birth	:					
Male	Female					
Name of School in v	which you are requesting a place:					
	/Nursery attended: more details are requested on next p					
Present School Stag	e:					
•	require any additional support with t n the support other children receive	_	Yes	No		
1b. Does your child disability or illness?	have any additional needs as a result	t of an assessed	Yes	No		
1c. Please provide d	etails of any additional support need	ds / assessed disa	bility: _			
2a.Has a Children's	Hearing decided that your child is Lo	oked After at ho	me?		Yes	No
2b. Has a Children's	Hearing decided that your child is Lo	ooked After away	from h	nome?	Yes	No
2c. If you answered	Yes to 2a or 2b, which Local Authorit	ty has responsibi	lity for	your ch	ild?	
3a. Is your child on t	the Child Protection Register?	Yes	No			
3b. If you answered	l Yes to 3a, pleased give the name of	the lead Social V	Vorker	and the	ir contact d	etails.

4a. What is your child's main language?
4b. Does your child speak any other languages?
5a. Is there a professional whom we need to contact about this application? Yes No
5b. If yes, Name and Contact Details of the professional:
6. Please list the full name of any sibling(s)/relative(s) 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.
For pupils arriving from outwith Dundee, please provide this information about your child's most recently attended school:
School Name:
School Name: School Address:
School Address: School Telephone Number:
School Address: School Telephone Number: School Email Address:
School Address: School Telephone Number:
School Address: School Telephone Number: School Email Address:
School Address: School Telephone Number: School Email Address:
School Address: School Telephone Number: School Email Address:
School Address: School Telephone Number: School Email Address:
School Address: School Telephone Number: School Email Address:

Name of Parent / Carer:				
Nationality:				
Relationship to Child:				
Address:				
Postcode:				
Contact Telephone Number:				
Contact Email Address:				
DECLARATION:				
 I declare that the information I have given on this form is correct and complete. 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 prosecution. I understand that relevant information may be passed on to third parties within the Local Authority 				
I understand that I will be responsible for the arrangement and cost of transport for the				

GENERAL DATA PROTECTION REGULATIONS 2018

Signature of parent/carer:

pupil to and from school.

Date: _____

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.