



## **Bovingdon Primary Academy**

## APPLICATION FOR ADMISSION OUTSIDE NORMAL AGE GROUP

This is not an application for admissions — it is an application to the Academy Governing Board for their agreement in principle to the child being admitted to any year group other than the child's normal year group. The completed form and any supporting documentation must be submitted to Bovingdon Primary Academy for consideration by the Academy Governing Board as soon as possible. Regardless of the outcome of this application, a separate application for admission will need to be made in the usual way, and will be considered with all other applications received, applying the oversubscription criteria as appropriate.

Parents can make an application for their child to start in Reception class in the **September following their fourth birthday**. All schools within Aspire Academies Trust provide full time education for those offered a place in Reception Year. Parents of children born between April and August may not defer entry. However, if you feel there are extenuating circumstances you may submit a request in writing to the Principal of the Academy attaching any evidence from professionals to support the case. Each case will be considered on an individual basis and a decision will be taken by the admitting authority which is Aspire Academies Trust.

This form should be read alongside the School's Admission Policy.

This form should be completed by the parent with whom the child lives for more than 50% of their time from Monday to Friday during term time. Please complete in block capitals using black ink. All names provided must be formal names, as stated in passports and other formal documents. The completed form should be forwarded to the school office at Bovingdon Primary Academy.

SECTION A – Child's	Details
Child's Surname:	
Child's Forename(s):	
Child's Date of Birth:	
Child's Main Home Address: (as defined in the Admissions Policy)	
CECTION D. Downst	- Dataile
SECTION B – Parent's	s Details
Parent's Surname:	
Child's Forename(s):	
Parent's Home Address: (if different)	
Parent's Email Address:	
Parent's Contact Number:	
SECTION C – Applica	tion Details
What date do you want the child to be admitted?	
What year group do you want the child to be admitted to?	

What year group would the child's normal age group be in?
Please give detailed reasons for your belief that it is in the best interests of your child to be admitted outside their normal age group. In doing so, please consider the following factors which will be considered by the Academy Governing Board:  • The parent's views;
<ul> <li>The Headteacher's view;</li> <li>The child's academic, social and emotional development;</li> <li>Where relevant, the child's medical history and the views of their medical professionals;</li> <li>Whether the child has previously been educated outside of their normal age group;</li> <li>Whether the child would have naturally have fallen into a lower age range were it not for having been born prematurely.</li> </ul>
This is a non-exhaustive list. There may be other factors that the Academy Governing Board will consider.

Please list all documen	ts attached in support of your application
SECTION D – Parent'	s Signature
	nation provided in this form is true and accurate, to the
I certify that the inform	nation provided in this form is true and accurate, to the
I certify that the inform best of my knowledge a	nation provided in this form is true and accurate, to the

