

SCHOOL PLACING REQUEST APPLICATION FORM



This application can be completed and submitted online at www.eac.eu/schoolplacingrequest or please complete in block letters and return to the address detailed below.

Please note that you are required to submit a separate application for each child and mid-term applications may take up to 28 days to process.

Part A – Pupil Details			
Forename:		Surname:	
House Number:		Street Name:	
Home Town:		Post Code:	
Date of Birth:		Sex (Male / Female):	
Does your child have additional support/medical/behavioural needs? Yes / No (delete as appropriate)			
<i>If yes, please provide details:</i>			
Part B – Current Registered School			
Name of Current Registered School or Early Childhood Centre:			
Current School Address: <i>(if not East Ayrshire School):</i>			
Stage at School:			
<i>If Secondary School please list all subjects studied:</i>			
Part C – School Requested			
Preferred Start Date:			
Name of School Requested:			
Part D – Reason for Request			
<i>(Please provide as much information as possible as it could be an advantage if there are more requests than places available in the school you have requested. This information may also be relied on should the decision be taken to appeal)</i>			

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Part E – Brothers and Sisters <i>(Please list the names and school attended for all brothers and sisters of school age in the family)</i>			
Full Name:	Age:	School Attended:	
Part F – Parent / Guardian Details			
Title:	Forename:	Surname:	
Relationship to Child:			
Home Address (if Different to Child)			
Town:	House No:		
Street Name:	Post Code:		
Contact Telephone No:			
Please mark X in the box if you agree to the Council communicating with you by email regarding your placing request application:			<input type="checkbox"/>
Contact Email Address:			
Please mark X in the appropriate statement box (one statement only)			
I agree that if granted, this placing request will take effect from the start of the next school session. <i>I understand that I will be responsible for all transport arrangements and costs to take my child to the school requested.</i>			<input type="checkbox"/>
Having considered the educational advice given against the mid-session transfer, I wish this request if granted to take effect at the first available opportunity. <i>I understand that I will be responsible for all transport arrangements and costs to the school requested.</i>			<input type="checkbox"/>
Parent/Guardians Signature:			
PRINT NAME:			
Date:			

Data Protection : The information that you provide on this form will be processed and held securely by the Council in accordance with Data Protection legislation. We will process the information for the purposes of providing your child with a place at an Education establishment. In line with our requirements under the Scottish Schools (Parental Involvement) Act 2006 we may also contact you, using the contact details that you have provided, to seek your views regarding the provision of Education services in the local authority area. For further information on our legal basis for processing your information and your rights in terms of Data Protection, please visit our website: <https://www.east-ayrshire.gov.uk/Resources/PDF/E/EducationServicesPrivacyNotice.pdf>

SUBMIT ONLINE or Return Application Form to:

Educationplacingrequests@east-ayrshire.gov.uk