**LA Notification form**

**This form is for Admission Authorities to notify the local authority of a decision to educate a child out of year group or for Headteachers who have accelerated or decelerated a child attending their school**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **School Details** | | | | | | | | | |
| **Name of School:** | | | | **Name of Headteacher:** | | | | | |
| **School Type** (voluntary controlled, community, Academy etc.) | | | |  | | | | | |
| **If the school’s admission authority is NOT the local authority, has the admission authority chosen to adopt the LA’s EOYG Process?** | | | | **YES** | | | | **NO** | |
| **Decision Maker:**  *(Headteacher or Admission Authority)* | | | | **Name of decision maker:** | | | | | |
| **Decision:**  *(Acceleration or deceleration)* | | | | **Signature of decision maker:** | | | | | |
| **Date of decision:** | | | | | |
| **Child Details** | | | | | | | | | |
| Surname | |  | | | Date of Birth | | | |  |
| Forename | |  | | | Gender | | | |  |
| Child’s home address | |  | | | | | | | |
| Post code | |  | | | | | |
| **Child’s chronological year group:** | |  | | **Year group the child is being educated:** | | | |  | |
| **Parent/Carer Consulted** | | | | | | | | | |
| Title |  | Forename |  | | | Surname |  | | |
| Relationship to child: | |  | | | | | | | |
| Date agreed with parent: | |  | | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Additional Information** | | | |
| Does the child have **an Education, Health and Care (EHC) Plan**? |  Yes  No | | |
|  Undergoing Assessment | | |
| Is the child known to the **Integrated Disability Service**  (IDS)? |  Yes  No | | |
| Name of IDS contact: |  | | |
| Is the child under the **care\*** of the Local Authority currently, or have they been previously? |  Yes  No | | |
| *\*Children in the care of, or provided with accommodation by, a local authority and children who were looked after, but ceased to be so because they were adopted (or became subject to a child arrangements order or special guardianship order)* | | | |
| If **yes**, please confirm current status by ticking the relevant box(es) | | Full care order |  |
| Interim care order |  |
| Special guardianship order |  |
| Child arrangements order |  |
| Adopted through LA |  |
| Child Protection Order in place |  |
| Child in Need Plan in place |  |

**Please email this completed form to admissions@warwickshire.gov.uk**