

REQUEST FOR ADMISSION OUTSIDE NORMAL AGE GROUP

Please carefully read the School's Admission Policy, which is published on the School's website and available in hard copy form from the School's main office, before completing this form.

| Child/Candidate's full legal name: | |
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| Child/Candidate's date of birth: | |
| Child/Candidate's current age: | |
| Child/Candidate's home address (as defined in the Admission Policy): | |
| Please only provide the details of one parent below. No details of the other parent should be given. | |
| Parent's full name: | |
| Parent's address (if different to above): | |
| Parent's email address: | |
| Parent's contact number: | |

| Child's normal year group: | | |
|--|--|--|
| Year group sought for child: | | |
| Please carefully set out your reasons for asking for the child/candidate to be admitted to a year group outside their normal year group: | | |
| You should have regard to the following factors which the Governing Body will take into account when considering whether or not to agree your request in principle: | | |
| Information about the child/candidate's academic, social and emotional development; Where relevant, the child/candidate's medical history and the views of their medical professional; Whether the child/candidate has previously been educated outside their normal age group; Whether the child/candidate may naturally have fallen into a lower age group if it were not for being born prematurely. | | |
| This is <u>not</u> an exhaustive list, and you should provide any other information you believe is relevant. | | |
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| Please list here any documentation you have attached in support of your request (e.g. a letter/report | | |
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| from the child/candidate's GP, hospital consultant or other medical professional, social worker, home tutor, nursery teacher, etc.): | | |
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| I certify that the information that provided in this form is true and accurate, to the best of my knowledge and | | |
| belief: | | |
| Signed: | | |
| Signed. | | |
| Name: | | |
| | | |
| Dated: | | |
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Please note that this is not an application for admission. A separate application for admission must be made in the usual way.

Parents/candidates are urged to make their request for admission outside normal age group well ahead of any deadlines for applying for admission, so that infirmed choices can be made.

The completed form, together with all supporting documents, should be sent to the Impact MAT Governance Team at clerk@imat.uk. Or via post or hand delivery for the attention of the Impact MAT Governance Team to Ravens Wood School, Oakley Road, Bromley, BR2 8HP for the attention of the Impact MAT Governance Team.