BEDFORD BOROUGH COUNCIL

School Admissions Service

Transfer to Upper School (Year 9) Application Form

2027

APPLY ONLINE at: www.bedford.gov.uk/onlineadmissions

If you are a parent or carer with parental responsibility, live within the area covered by Bedford Borough Council, and you would like to apply for a place at any upper school, you must apply online or complete this application form.

Please apply online or, if you use this form, return it to the School Admissions Service.

If you live in another Local Authority do not complete this form. You **must** fill in your home Local Authority's application form and return it to them.

Please do this as soon as possible, and no later than **31 October 2026**. If you do not apply by this date, we cannot guarantee to consider your request.

Before you apply please read carefully the School Transfer booklet at **www.bedford.gov.uk/uppertransfer**

If you need help in understanding or completing this form, or you need this information in another format, please contact the School Admissions Service (see page 4 for contact details).

If filling in this form electronically, please save the filled-in form and email to **admissions@bedford.gov.uk** as an attachment.

Or return the filled-in form by post to:
School Admissions Service, Borough Hall, Cauldwell Street, Bedford, MK42 9AP

Section A: Pupil's Details

Please complete this form using BLOCK LETTERS, using BLACK INK

Pupil's Surname: | First Name(s):

Pupil's Address at time of application:

Date of Birth (1/9/13 - 31/8/14):

Gender (please tick): Male: | Female:

Name of current school and date admitted:

Name of Parent or Adult with parental responsibility:

Title (Mr/Mrs etc): | First Name: | Surname:

Relationship to Child: | Home Phone:

Email Address: | Mobile Phone:

Please note that any offer made will be withdrawn if we find that the parents have given false information.

Section B: School Preferences

This part of the form relates only to state upper schools. You may nominate up to three preferred upper schools. One of these would normally be your catchment school (if applicable).

Places will be allocated strictly in accordance with each school's admissions criteria – you need to take this into consideration when nominating your preferred schools. If your child has an Education, Health & Care Plan (EHCP) please refer to notes under the Local Authority Standard Admissions Criteria in the booklet and also refer to Other Information in the booklet.

Please read the admissions criteria for the schools you are interested in. Please also read the section in the booklet entitled 'How are places allocated?'.

Naming only one school, or naming the same school more than once, will not increase your chance of being offered a place.

Order of Preference:	**Name of School:**
1 Preference:	
2 Preference:	
3 Preference:	

* **If a place cannot be offered for my child at any of the schools I have listed above, I wish my child to be considered for a place at my catchment area school.**

* *If you do not want your child to be considered for a place at the catchment area school, please delete the sentence above. However, if you do this, a place may not be available at either your catchment area school or a school close to your home.*

Section C: Other children

If you have an older child who, at time of admission, will still be attending one of the schools you have nominated, please give details below:

Name:	Date of Birth:	School attending:
Name:	Date of Birth:	School attending:

Section D: Other Information

(See booklet, Other Information i) to iv)

Please tick

	Yes	No
i. Does your child have an Education, Health & Care Plan (EHCP)?	☐	☐
ii. Is your child a "looked after" or previously "looked after" child? (See booklet for definition)	☐	☐

Name of Authority:

Date the child became 'Looked After':

Name / Contact details of the Social Worker:

iii. Does your child have "exceptional" medical grounds why she/he should be given priority of admission to one of the schools in Section B? (See booklet for definition)	☐	☐
iv. Does your child have a parent/carer who works at any of the schools in Section B? (If yes, please give details below)	☐	☐

Additional Information

Please use this box for the information required in Section D plus any additional information to support your application. If necessary, please continue on a separate sheet.

Declaration

I confirm that the information given on this form is correct and that I have read the admissions arrangements and understood the way in which places are allocated.

I agree to provide the School Admissions Service with information regarding my child's address, upon request, as part of their verification process. (See Pupil's Details in the booklet.)

Name of Parent or Adult with parental responsibility:

Signature of Parent or Adult with parental responsibility:

Date:

If you have any questions about the admissions arrangements, please contact:

School Admissions Service,
Borough Hall, Cauldwell Street
Bedford MK42 9AP

Telephone General Enquiries Line: 01234 718120

Fax: 01234 228846

Email: admissions@bedford.gov.uk

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Data Protection

Under new Data Protection regulations (GDPR) Bedford Borough Council needs to inform you of the reasons why we are capturing your data and what we will do with your data. Any personal data collected and/or processed under this policy/procedure will be dealt with in accordance with Data Protection Legislation and the Council's Data Protection Policy. Data is held securely and accessed by, and disclosed to individuals only where relevant to this policy/procedure. To find out more information on this follow the link below.

View the Council's current Privacy Notices at www.bedford.gov.uk/gdprprivacy

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design@bedford.gov.uk