



To be completed by a Parent or Guardian ONLY

		Please complete using block capitals			
Your child(ren)'s name(s) and date(s) of birth(s)					
Child(ren)'s current school					
What date are you moving?					
Are the whole family moving?	Yes		No		
If no, who is moving and who is staying?					
Is the move permanent?	Yes		No		
If no, please state expected return date					
Last date your child(ren) will attend the school					
Are you moving due to a Military Services posting?	Yes		No		
Current UK address					
New address					
If you are moving within UK:					
Are child(ren) in the admissions process, if yes, give details of					
a) Local Authority name	a)				
b) Name of schools applied for	b)				

Name and contact details of offered school:		
Does your child have an expected start date?		
If you are moving overseas:		
Name and address of possible or confirmed new school	Name of school:	
	Address:	
Contact details for new school	Telephone:	
	Email:	
Flight or ferry details: a) Airline/ferry b) Date of travel c) Destination airport/port d) Destination country	a) b) c) d)	

Please return this form to the school Office before your child leaves

<p>Please tick to confirm you are aware that if you wish to return to the current school you would need to reapply online at https://www.lincolnshire.gov.uk/school-admissions/apply-school-place</p> <p>There is no guarantee of a place being available in the future. Please tick here. <input type="checkbox"/></p>		
Person providing information:		
Name:		
Mobile Number:		
Email:		
Relationship to child:		
Any additional information:		
Date:		Signature:

Thank you