

Application for Special Provisions (SP Form)

Full Name of Child: _____ (Block Capitals)

Date of Birth: (dd/mm/yyyy) _____

Carefully read the document, “**Claiming Special Provisions – A Guide for Parents and Guardians**” before completing the sections below. Please note, every claim must have Section A, Section B and Section G completed as a minimum requirement for the application to be considered.

Section A – Basis of Special Provisions Claim

Special Provisions is available for children who meet one or more of the following criteria, please tick one or more of the situations outlined below which apply to your child and attach the appropriate evidence to this form:

CRITERION	TICK
(i) My child has received more than half of their education in a school outside Northern Ireland	
(ii) My child will be transferring from a primary school outside Northern Ireland	
(iii) My child, due to a serious medical or other problem, was EITHER unable to sit the SEAG Entrance Assessment OR has estimated outcomes because they only sat one of the two Entrance Assessment papers.	

Section B

Please complete Section B(i), B(ii) or B(iii) as applicable

Section B(i)

If you are Claiming Special Provisions because your child has received more than half of their primary education in a school outside Northern Ireland, please complete the Table below (current school first):

Name of School	Date my child first attended: dd/mm/yyyy	Date my child last attended: dd/mm/yyyy	Full address of school	Email address of school	School contact telephone number

Please continue on an additional page if necessary.

You **MUST** also obtain a letter on school headed notepaper from your child's current primary school signed by the school Principal which shows the total dates of your child's education within Northern Ireland. This information is available to the primary school Principal through the SIMS School History section.

Section B(ii)

If you are claiming Special Provisions because your child will be transferring from a primary school outside Northern Ireland, please provide the following details about the Primary School:

Primary School Name:	
Address:	
Email address:	
Contact phone number (with country code if applicable);	
Name of Headteacher/Principal:	

You **MUST** also attach a signed and dated letter from the Principal of the primary school which contains the full name, date of birth and home address of your child, confirming that your child is currently a pupil at the school and also states the date when your child commenced their education at that school.

If, due to your particular circumstances, you are unable to provide documentation from former school(s) you **MUST** explain why it is that that documentation cannot be provided. It is anticipated that this will only arise in respect of those children who have recently arrived in Northern Ireland from countries where conflict or political unrest make the provision of documentation difficult or impossible. Schools in Northern Ireland still have a legal duty to verify the basis of your application and are legally obliged to make reasonable requests to do so.

Section B(iii)

If you are claiming Special Provisions because your child, due to a serious medical or other problem, was **EITHER** unable to sit the SEAG Entrance Assessment **OR** has an estimated outcome because they only sat one of the two Entrance Assessment papers, please provide details of the grounds of your claim below:

Please continue on an additional page if necessary.

You should provide a letter from your child's GP or Medical Consultant or another appropriate professional indicating the nature of the serious medical problems or reason for the absence and/or how it prevented your child from taking either SEAG Entrance Assessment Paper 1 or Paper 2.

Section C – if claiming under Criterion (i) or (ii)

If your child has received more than half of their education in a school outside Northern Ireland

OR

your child will be transferring from a school outside Northern Ireland

please complete this section:

Did you child take the SEAG Entrance Assessment? (Please tick as appropriate)	YES	NO
If YES, please provide the information requested below:		
Name of Assessment Centre		
Result in form of Total Standardised Age Score (TSAS)		
Result in form of Band		

Section D – Educational Evidence

Has your child been assessed by an Educational Psychologist?	Yes		No	
(if you have ticked Yes, please attach the report to this form)				
Are you able to provide any information relating to standardised test scores for your child?	Yes		No	
(if you have ticked Yes, please complete the table below:)				

In support of your claim for Special Provisions, if your child has standardised test results available from their primary school please set them out below. You are entitled to receive this data under the Education (Pupils Records & Reporting) (Transitional) Regulations (NI) 2009, the Freedom of Information Act and the Data Protection Act.

Year	Test taken	Name of Standardised Test	Date Tested	Standardised Score
Primary 5 or equivalent	English/Literacy:			
	Maths/Numeracy:			
	Other:			
	Other:			
Primary 6 or equivalent	English/Literacy:			
	Maths/Numeracy:			
	Other:			
	Other:			
Primary 7 or equivalent	English/Literacy:			
	Maths/Numeracy:			
	Other:			
	Other:			

In support of your claim for Special Provisions, please provide any other standardised results which are available from your child's primary school or from specialist educational reports which are not included in the table above:

If you have provided standardised test results above, please note that a signature is required to authenticate this educational data. This signature authenticates the educational data only - it does not signify any support or comment on the other information provided.

Signature of Principal: _____ Date: __

Name of Principal: _____
(BLOCK CAPITALS)

Name of Primary School: _____
(BLOCK CAPITALS)

Section E – Comparative Educational Evidence

It may assist this application if you were to supply, **where available**, as much as possible of the data for the other pupils in your child's class. **No names should be provided, except for that of the child named above.**

Please complete the table below. Some schools may find it more convenient to provide information in the table as a printout from a spreadsheet or other program. A signature is required to authenticate the educational data only – it does not signify any support or comment on the other information provided.

Pupil	Standardised Test Scores									SEAG Total SAS
	P5 Maths/ Numeracy	P5 English/ Literacy	P6 Maths/ Numeracy	P6 English/ Literacy	P7 Maths/ Numeracy	P7 English/ Literacy	Other (please specify)	Other (please specify)	Other (please specify)	
Pupil 1										
Pupil 2										
Pupil 3										
Pupil 4										
Pupil 5										
Pupil 6										
Pupil 7										
Pupil 8										
Pupil 9										
Pupil 10										
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Pupil 28										
Pupil 29										
Pupil 30										

Signature of Principal: _____ Date: __

Name of Principal: _____
(BLOCK CAPITALS)

Name of Primary School: _____
(BLOCK CAPITALS)

Section F – Any other relevant information

Please provide any other information, not captured in the sections above, which is relevant to your application for Special Provisions for your child:

(Continue on a separate sheet if necessary and attach it to this form)

Section G – Parent/Guardian Declaration

Please complete the declaration below:

- I have read and understood the information provided in the document “Claiming Special Provisions – A Guide for Parents 2023 – 24) and in the Admissions Criteria of the schools that I have listed on the Transfer Application relating to Special Provisions.
- I have attached all of the relevant documents from my child’s primary school and other relevant sources to support and verify my application for Special Provisions and all other documentary evidence in support of this application.
- The information that I have provided on this form and attached to it is correct and has been appropriately verified.
- I accept that the provision of false or incorrect information may result in either the withdrawal of a place or the inability of a school to offer a place to my child.
- I agree that the information I have provided may be shared with other schools using the SEAG Entrance Assessment. I agree that the report of any further assessment of my child’s ability carried out in any school may be shared with other schools using the SEAG Entrance Assessment.

Signature of Parent/Guardian: _____ Date: _____

Name of Parent/Guardian: _____ (BLOCK CAPITALS)

This application for Special Provisions must be uploaded with the Transfer Application via the Education Authority application process.(see Parents' Guide for Claiming Special Provisions)