## REMOVAL OF PUPIL FROM ADMISSION ROLL

There are strict grounds as to when schools may remove pupils from their admissions register. These are outlined in **regulation 9** of the School Attendance (Pupil Registration) (England) Regulations 2024. Regulation 13(4) states that when a school has decided to delete a pupil’s name from their admission roll, they must notify the Local Authority.

This responsibility applies to all Maintained Schools, Academies, Free Schools, Studio Schools, University Technical Colleges, Education Support Centres and Independent Schools*.* Please use this form in conjunction with the Regulations. **Once completed return the form to** [**CME@togetherforchildren.org.uk**](mailto:CME@togetherforchildren.org.uk) **along with any supporting documentation requested.**

**If the pupil has left school and there are concerns about the pupil’s welfare, for example the pupil is at risk of Child Sexual Exploitation or radicalisation school must also contact** [**EHAAT@togetherforchildren.org.uk**](mailto:EHAAT@togetherforchildren.org.uk)

**Please provide the following information**

|  |  |
| --- | --- |
| **Name of School/Academy Removing Pupil** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname of Pupil** |  | **First name of pupil** |  |

|  |  |  |
| --- | --- | --- |
| **DOB:** | **Year Group:** | **Male  Female ** |

|  |  |
| --- | --- |
| **Name of parent with whom pupil normally resides** |  |

|  |  |
| --- | --- |
| **Address (or new address if pupil has moved)** |  |

|  |  |
| --- | --- |
| **Parents Tel No:** | **Parents Email Address:** |

**UPN:**

**Date pupil removed from roll:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the pupil Cared for? **Yes / No**  If yes, by which Local authority? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the pupil have an Education Health Care Plan? **Yes / No**

|  |  |
| --- | --- |
| **Name of New School** |  |
| **Confirmed Start Date at new school** |  |

|  |  |
| --- | --- |
| **Address of new school if outside of Sunderland** |  |

**REASON FOR REMOVING PUPIL FROM THE ADMISSION ROLL in accordance with regulation 9** of the School Attendance (Pupil Registration) (England) Regulations 2024

|  |  |  |
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| **9a** | **A new school is named on a School Attendance Order, or the Order is revoked by the local education authority.**    **If not attending a new school:** Reason School Attendance Order was revoked: |  |
| **9b** | **Pupil is registered at another school** |  |
| **9c** | **Pupil is registered at more than one school, and they have agreed to them being single registered** |  |
| **9d** | **Electively Home Educated**  A pupil may only be removed from school roll if written notification has been received from the parent confirming their intention to educate the child.  A copy of the Parents letter along with an Elective Home Education Pupil Profile must be sent to [EHE@Sunderland.gov.uk](mailto:EHE@Sunderland.gov.uk) & [CME@togetherforchildren.org.uk](mailto:CME@togetherforchildren.org.uk) |  |
| **9e** | **Pupil has moved, ceased to attend and the new address is not within a**  **reasonable distance of the school or academy.** They need to be reported as CME if there is no new school destination and can’t be removed for roll for 20 days whilst tracking by school and LA CME officer is ongoing. |  |
| **9f** | **Pupil has failed to return from an agreed leave of absence for exceptional circumstances.**  Schools must inform parents that student is to be removed and that parents will have to apply for school place on return.  Pupil’s name may only be removed if they are **not** prevented from attending because of sickness or reasonable cause **and** joint enquiries by the school/academy have failed to ascertain the pupil’s whereabouts. |  |
| **9g** | **Pupil is certified as medically unfit and is likely to remain so beyond compulsory school age.**  Please attach a copy of certificate issued by the Medical Officer to confirm that the Medical Officer and the Parent have agreed to the removal from roll. |  |
| **9h** | **Pupil has been continuously absent for more than twenty school days and school have been informed they have moved from area but don’t have full details.**  **The relevant required CME documentation has been completed and submitted.**  The pupil must have been continuously absent (unauthorised) for more than 20 school daysand is not prevented from attending due to sickness or reasonable cause. Joint enquiries by the school/academy **and** CME officer have failed to ascertain the pupil’s whereabouts. |  |
| **9i** | **Pupil is in Custody**  Please confirm that the pupil is serving a custodial sentence of four months or longer **Yes / No** |  |
| **9j** | **Pupil is deceased** |  |
| **9k** | **Pupil will cease to be of compulsory school age before the school next meets.** |  |
| **9l** | **The relevant person has indicated that the pupil will cease to attend the school or the pupil does not meet the academic entry requirements for the school’s sixth form.** |  |
| **9m** | **Pupil has been permanently excluded (and any appeal process is complete).** |  |
| **9n** | **Pupil completing nursery education is not transferring to reception or a higher class at the school.** |  |
| **9o** | **Pupil is a boarder, and fees remain outstanding at the end of the school term to which they apply.** |  |

**Please Note: Whenever a pupil leaves a school a Common Transfer File (CTF) MUST accompany him or her. Further information on the transfer of a CTF can be found on** [**www.teachernet.gov.uk**](http://www.teachernet.gov.uk) **and** [**www.education.gov.uk**](http://www.education.gov.uk)

**Date CTF sent to new school or lost pupil database: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of person completing this removal from roll form (please print):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact telephone number: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date form completed**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please return the completed form (along with any additional documents requested for EHE) to:** [**CME@togetherforchildren.org.uk**](mailto:CME@togetherforchildren.org.uk)