Selective Eligibility Test Administration on behalf of the Admissions Offices of the Participating Schools



PRIVATE AND CONFIDENTIAL

PRIMARY SCHOOL FORM

Selective Eligibility Test and Second Stage Testing (September 2025 Entry)

Child's Name:	
Child's Date of Birth:	
Name of Primary School:	
school to complete the form form will be used by the SEI consider what access arran	ENCO or other appropriate staff member at my child's primary below. I understand that the information requested on the NCOs of the participating schools named above to help gements (if any) will be appropriate for my child for the if successful for any second stage entrance examination for er 2025.
Parent Name:	
Contact email address:	
Contact email address: Date: This section of the form is	to be completed by the SENCO or other appropriate state
Date: This section of the form is nember at the child's primulation and the purpose of this form the child when sitting entrance the child when sitting entrance the child way of working measuidelines on access arrange	to be completed by the SENCO or other appropriate state ary school: rm is to gain information as to the child's normal way of working to the access arrangements (if any) that would be appropriate for e tests for selective school places. ans the way the child most often or always works (as per the JCC ements and reasonable adjustments) f child's diagnosis / condition(s):

Does the child have an EHCP?	YES / NO
Is the child given additional time in timed assessments? If YES, please give more details. Is additional time given in all assessments or just certain types? How much additional time is the child given? For how long has this arrangement been in place?	YES / NO
Is the child given rest break(s) during classroom activities or timed assessments? If YES, please give details including For how long has this arrangement been in place?	YES / NO
Is the child seated in a separate room / smaller room for timed assessments? If YES, please give details including For how long has this arrangement been in place?	YES / NO
Is there any other arrangement that is normally in place for the child when undertaking classroom activities or timed assessments (for example, fiddle toy, prompt, laptop, etc)? If YES, please give details For how long has this arrangement been in place?	YES / NO
In your opinion, would this child be substantially disadvantaged without his/her current support arrangements?	YES / NO

Name of person completing the form	
Position (job title)	
Name of Primary School	
Contact telephone number	
Contact email address	
Dated	

Return of Form

We ask for the completed form to be returned as soon as possible and by **the final deadline of Friday 14 June 2024**. Please email the completed form to sen-set2025entry@suttongrammar.school

To the Parent/Carer:

Please liaise with your child's primary school to ensure return of the form by the **final deadline of Friday 14 June 2024.** Any queries can be sent to sen-set2025entry@suttongrammar.school