



PRIVATE AND CONFIDENTIAL

PRIMARY SCHOOL FORM

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

This section of the form is to be completed by the parent/carer:

Child's Name:	
Child's Date of Birth:	
Name of Primary School:	
I give my consent for the SENCO or other appropriate staff member at my child's primary school to complete the form below. I understand that the information requested on the form will be used by the SENCOs of the participating schools named above to help consider what access arrangements (if any) will be appropriate for my child for the Selective Eligibility Test and if successful for any second stage entrance examination for entry to Year 7 in September 2025.	
Parent Name:	
Contact email address:	
Date:	

This section of the form is to be completed by the SENCO or other appropriate staff member at the child's primary school:

NOTE: The purpose of this form is to gain information as to the child's normal way of working* to help inform decisions as to the access arrangements (if any) that would be appropriate for the child when sitting entrance tests for selective school places.

*"normal way of working" means the way the child most often or always works (as per the JCQ guidelines on access arrangements and reasonable adjustments)

Please give brief details of child's diagnosis / condition(s):

Please give information as to how this condition has impacted on teaching and learning in the classroom as well as timed assessments:

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 <u>how long</u> 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 <u>how long</u> 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 <u>how long</u> 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 <u>how long</u> 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	
<p><u>Return of Form</u></p> <p>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</p>	

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