**FORM FOR CHANGE OF PUPIL ADMISSION NUMBER (PAN)**

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| This form must be completed and returned to the Diocesan Director of Education (DDE) (Tim Reid – [treid@cofe-worcester.org.uk](mailto:treid@cofe-worcester.org.uk)). Written confirmation of receipt and consent (where appropriate) will be provided by the DDE on behalf of the Diocesan Board of Education (DBE). This form should be submitted following consultation arrangements having been fully completed and agreed to proceed. For details of this procedure, please refer to the [Schools Admissions Code.](https://assets.publishing.service.gov.uk/media/60ebfeb08fa8f50c76838685/School_admissions_code_2021.pdf) | |
|  | **\*Delete as applicable** |

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| **School Details** | |
| **Name of School or Academy** |  |
| **Voluntary Aided / Voluntary Controlled (if a maintained school)** |  |
| **Name of Trust (if an academy)** |  |
| **School Address** |  |
| **Name and email address of Chair of Governors / Trust Board\*** |  |
| **Name and email address of Headteacher / CEO\*** |  |
| **School contact number** |  |

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| **Details of proposed change of PAN** | |
| **Current NoR** |  |
| **Current PAN** |  |
| **Proposed PAN** |  |
| **Date from which change of PAN is proposed to take effect.** |  |
| **Proposed admission years effected** |  |
| **Does the proposed PAN change affect one year group or all year groups across the school?** |  |
| **Current class arrangements and numbers in each.** |  |
| **Proposed class arrangements and numbers in each should proposed PAN change go ahead.** |  |
| **Please fully state the reason(s) for your request to change the PAN.** |  |
| **Please fully state what financial implications this will have on the school / academy, including costs to staffing (especially where restructure is considered).** |  |
| **Please fully describe what impact this will have on neighbouring schools.** |  |

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| **Signed (Chair of Governors / Trust Board\*)** |  |
| **Date** |  |

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| **Signed (Headteacher / CEO\*)** |  |
| **Date** |  |