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| **Children missing education weekly return to la** | | | | | | | | | | | | | |
| **school** |  | | | | | | **Week ending** | | |  | | | |
| **Pupils admitted** | | | | | | | | | | | | | |
| Forename | Surname | Dob | m/f | Date on roll | | Reason for addition | | Parent name & address | | | | Previous home address & last school attended | |
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| **Pupils removed from roll** | | | | | | | | | | | | | |
| Forename | Surname | Dob | Date removed | | Reason for deletion | | | | Parent name & home address | | New home address and name of school confirmed attending | | Cme referral  y/n\* |
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**\*if cme referral is yes - the cme referral form must be fully completed and returned with this form**