

Brampton Village Primary School

ADMISSION FORM



Please complete all of this form and sign where indicated

The Data Protection Act (1998), The General Data Protection Regulation (2018) and the Education (School Records) Regulations (1989) protect this strictly confidential information, stored on the school's student records database. The information on ethnic origin and first language is needed by the school and by Cambridgeshire County Council (the Children's Services Authority). This is to ensure that resources are made available when required and that the Education Service offers real equality of opportunity for all pupils.

The sections marked * are non-compulsory. If supplied, this information will be shared with Education Welfare Benefit Service, Cambridgeshire County Council, and other relevant bodies administering public funds, who collect and use information about you so that we can provide your child(ren) with entitlement to education benefits under The Education Act 1996.

By signing this form, I confirm I understand that data will be shared as appropriate to enable: determination of the support available; verification of any entitlement to Free School Meals/Pupil Premium; prevention and detection of fraud in connection with any claims; periodic checks by the Education Welfare Benefit Service to confirm entitlement to education benefits.

Full details about how we use this data and the rights you have around this can be found at www.cambridgeshire.gov.uk/privacy. If you have any data protection queries, please contact the Data Protection Officer at data.protection@cambridgeshire.gov.uk

YOUR CHILD'S DETAILS

| | | | |
|--|----------|--|--|
| Legal surname (as it appears on your child's birth certificate) | | | |
| Legal forename (as it appears on your child's birth certificate) | | | |
| Middle name(s) | | | |
| Preferred forename | | | |
| Preferred surname (if applicable) | | | |
| Date of birth | | Gender | |
| Home Address | | | |
| | Postcode | | |
| Is your child in Local Authority care? | Yes/No | If Yes, Name of Care Authority | |
| Has your child been in Local Authority care previously? | YES/NO | If Yes, Name of Care Authority and dates in care | |

| | |
|-------------------------------------|--|
| Name and address of previous school | |
|-------------------------------------|--|

If your child's previous school is overseas, please give the name and address of any previous UK school attended

| |
|--|
| |
|--|

EMERGENCY CONTACT DETAILS

*Please provide details of at least two and a maximum of four parents/guardians/contacts below and place them in the order you wish them to be contacted in an emergency, for example if your child is unwell and needs to be collected from school. It is important that this information be kept up to date, for example if you move house or change your mobile telephone number. We are unable to hold contact details of people who do not have parental responsibility without their consent. **A separate form which records this consent should be completed for each contact who does not have parental responsibility.***

| Priority | Name | Relationship to child | Parental Responsibility |
|----------|------|-----------------------|-------------------------|
| 1 | | | YES/NO |
| 2 | | | YES/NO |
| 3 | | | YES/NO |
| 4 | | | YES/NO |

DETAILS OF CONTACT WITH PARENTAL RESPONSIBILITY

| | | | | | |
|---|----------|---------|------------|----------|--|
| Title | | Surname | | Forename | |
| Date of Birth* | | | NI number* | | |
| Home Address | | | | | |
| | Postcode | | | | |
| Telephone Numbers | Home | | | | |
| <i>Please rank to indicate the best number on which contact you</i> | Mobile | | | | |
| | Work | | | | |
| We will use the e-mail address below to communicate with you when sending out newsletters and other messages, including those specific to your child (for example following up on an absence when we cannot reach you by telephone). By giving an e-mail address below, you are indicating your consent to electronic communications. | | | | | |
| E-mail address | | | | | |

| DETAILS OF CONTACT WITH PARENTAL RESPONSIBILITY | | | | | |
|---|----------|---------|------------|----------|--|
| Title | | Surname | | Forename | |
| Date of Birth* | | | NI number* | | |
| Home Address | | | | | |
| | Postcode | | | | |
| Telephone Numbers <i>Please rank to indicate the best number on which contact you</i> | Home | | | | |
| | Mobile | | | | |
| | Work | | | | |
| We will use the e-mail address below to communicate with you when sending out newsletters and other messages, including those specific to your child (for example following up on an absence when we cannot reach you by telephone). By giving an e-mail address below, you are indicating your consent to electronic communications. | | | | | |
| E-mail address | | | | | |

| SEPARATED PARENT INFORMATION (IF APPLICABLE) | | | | | |
|--|----------|---------|--------------------------|----------|--------|
| Under the 1989 Children's Act all parents have the right to receive information about their child's progress, so please provide contact details of separated parents where known | | | | | |
| Title | | Surname | | Forename | |
| Date of Birth* | | | NI number* | | |
| Home Address | | | | | |
| | Postcode | | | | |
| Telephone Numbers <i>Please rank to indicate the best number on which contact you</i> | Home | | | | |
| | Mobile | | | | |
| | Work | | | | |
| E-mail address | | | | | |
| Court Case | YES/NO | | Address can be Disclosed | | YES/NO |

SERVICE CHILDREN IN SCHOOL

Schools are required to indicate whether a child has a parent(s)/guardian(s) currently serving in regular military units of any of the armed forces, and designated as Personnel Category 1 or 2. Please could you indicate if your child is a 'service child in education' by ticking one of the boxes below

| | | | | | |
|-----|--|----|--|--|--|
| Yes | | No | | I do not wish a service child indicator to be recorded | |
|-----|--|----|--|--|--|

MEDICAL & SEN Details

| | | | |
|--|--|--|--|
| Doctor | | | |
| Telephone No | | | |
| Address | | | |
| Please give details of any medical condition of which the school should be aware (e.g. asthma, epilepsy, allergies). Will medication need to be kept in school? | | | |
| Please give details of any medically diagnosed food allergy or intolerance | | | |
| Does your child have any Special Educational Needs Provision? If so, please indicate whether this is SEN Support/EHCP/Statement. | | | |

PERSONAL INFORMATION

To help the local authority in monitoring equal opportunities you are asked to complete the following

| | | | |
|------------------|--|-------------|--|
| Country of birth | | Nationality | |
|------------------|--|-------------|--|

***Family's Ethnic Origin.** Our ethnic background describes how we think of ourselves. This may be based on many things, for example, our skin colour, ancestry or family history. Ethnic background is not the same as nationality or country of birth.

| | | | |
|--------------------------------------|--|--|--|
| White - British | | Any other Asian background (This includes African Asian, Nepali, Sinhalese, Sri Lankan Tamil....) | |
| White - Irish | | | |
| White - Traveller of Irish Heritage | | Black or Black British -Caribbean | |
| White - Gypsy/Roma | | Black or Black British -African | |
| White - Any other White background | | Any other Black background | |
| Mixed - White and Black Caribbean | | Chinese | |
| Mixed - White and Black African | | Any other ethnic group – please circle one : Afghan, Arab, Egyptian, Filipino, Iranian, Iraqi, Japanese, Korean, Kurdish, Latin American, Lebanese, Libyan, Malay, Mauritian, Moroccan, Polynesian, Thai, Vietnamese, Yemeni | |
| Mixed - White and Asian | | | |
| Mixed - Any other mixed background | | | |
| Asian or Asian British - Indian | | | |
| Asian or Asian British - Pakistani | | | |
| Asian or Asian British - Bangladeshi | | I do not wish an ethnic background to be recorded | |

| | | | |
|---|--|--|--|
| First language | | | |
| Home language | | | |
| Religion | | | |
| Are there are any religious or cultural practices of which the school should be aware? Please specify | | | |

SILBLINGS

Please give the names of any other children in your family who attend Brampton so that we can ensure that we link their records

LUNCH ARRANGEMENTS

Please indicate what meal pattern you expect your child to follow below

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|--------------|--------|---------|-----------|----------|--------|
| School lunch | | | | | |
| Packed lunch | | | | | |

TRAVEL ARRANGEMENTS

Linked to the Government's Travel to School Initiative, we are currently reviewing our school travel plan, which details how our students travel to and from school. We would be grateful if you could tell us what mode of transport your child normally uses. Where he/she uses more than one mode of travel for each journey to school, you should tell us the most frequently used and/or the longest element of the journey by distance.

| | | | | | | | |
|------------------|--|-----------|--|-----------------|--|------|--|
| Public transport | | Walk | | Bicycle/Scooter | | Taxi | |
| Car/Van | | Car Share | | Other | | | |

COLLECTION ARRANGEMENTS

Please indicate below up to four people who are authorised to collect your child at the end of the school day

| | |
|--|--|
| | |
| | |

Please indicate below if there is anybody who is not authorised to collect your child from school

| | |
|--|--|
| | |
|--|--|

DECLARATION I certify that, to the best of my knowledge, the information on this form is correct.

| | | |
|-----------|--|-----------------|
| Signature | | Parent/Guardian |
| Date | | |

| | | | | |
|------------------------|------------------|------------|-------------------|------------|
| Office use only | ID Evidence seen | Checked by | Entered onto SIMS | Entry Date |
| | | | | |

| | | |
|---|-----|----|
| NAME OF CHILD | | |
| PARENTAL CONSENT | | |
| <p><i>This section of the form seeks your consent for events that may arise during your child's time at Brampton Village Primary School, and gives the reason why we are asking for your consent. You may also wish to review the school's Privacy Notice, available on the school website. If parents/carers give consent this can be withdrawn at any time by writing to the school or by e-mail to office@brampton.cambs.sch.uk. Our records will then be updated accordingly.</i></p> | | |
| <p>1. <u>Emergency Hospital Treatment</u></p> <p><i>If your child has an accident while at school which requires hospital treatment, we shall try every means of contacting you. If we are unable to contact you, and have to take your child to hospital, the hospital requires parental consent before they can carry out any investigations or treatment in your absence.</i></p> | | |
| In the event of my child having an accident at school I give parental consent for the hospital to carry out any investigation or treatment in my absence. | YES | NO |
| Please give any other instruction re emergency hospital treatment (e.g. no blood products) | | |
| <p>2. <u>Food sampling</u></p> <p><i>During their time at school your child will be sampling food as part of their school work. In order for them to participate in this activity please give consent as follows.</i></p> | | |
| I consent to my child sampling all foods at school | YES | NO |
| My child is allergic to the following food or substances and I therefore do not wish them to eat foods which may contain these substances. | | |
| | | |
| | | |
| I consent to my child sampling foods other than these. | YES | NO |
| I do not consent to my child sampling foods for the following reason (other than that stated above) | | |
| <p>3. <u>Local trips on foot</u></p> <p><i>Local visits to Brampton High Street, the Parish Church of St Mary Magdalene, The Methodist Church, the village green and streets around the school enhance the teaching of Geography, History and Religious Education throughout the school. Parents are generally informed about such visits in advance, but occasionally small groups of children may be taken shopping to buy items required for a project or to visit a local point of interest. For short, local trips a general permission from parents is sought. All school trips are organised in accordance with the school's educational visits policy and levels of supervision meet or exceed recommended ratios of children to adults.</i></p> | | |
| I give my consent for my child to take part in activities in Brampton village. | YES | NO |
| <p>4. <u>Internet Safety</u></p> <p><i>The majority of the school's computers are linked to the internet and pupils use the internet and e-mail as part of their work across the curriculum. The LA and school have put safeguards in place to prevent children accessing inappropriate or offensive material. However, there is no technical solution which can completely guarantee the restriction of pupils to unwanted material. We teach pupils to use the internet appropriately and responsibly. Teachers explain the rules for responsible internet use and a copy of these rules is displayed near every internet-linked computer. Please share and discuss the Acceptable Use Agreement/e-Safety Rules (enclosed) with your child.</i></p> | | |
| I have read, shared and discussed with my child the information on Acceptable Use for the internet and I agree to support the school in enforcing these rules. | YES | NO |
| I agree my child may use the internet in school. | YES | NO |

5. Use of Pupil Photographs and Videos

School photographers visit the school each Autumn Term to photograph pupils (individually and with siblings). Parents have the opportunity to purchase copies of these pictures using proof cards which have a unique reference number and the pupil's name printed on them. The photographers provide a memory stick with the photographs taken for upload onto our school database. These photographs will also appear on our payment system and our Medical Tracker (first aid) system.

In the Summer Term, school photographers visit to take class and team photographs. Parents will be given the opportunity to purchase copies from non-specific proofs.

Photographs of children may be taken in school to record activities and celebrate achievements. On occasion these photographs may be used in displays around the school. Generally these will not be named, but if they are then first names only will be used.

We publish a selection of photographs or pictures of children's work on the school website, for which children's names are not published. We also publish photographs in the school brochure, where no names are given.

On occasion, for example when participating in sporting and other events at other schools, we are asked if photographs featuring Brampton pupils may be published. This could be on a school website or in a newsletter, and children's names would not be published.

From time to time, press photographers visit the school to photograph events for local newspapers. It is our policy that individual pupil names are not printed alongside the photographs, and specific consent would be requested if this were to arise. Consent for your child's picture to be published in a local newspaper may also mean publication in an online edition.

| | | |
|--|-----|----|
| I give consent for my child's picture to be taken by the school photographer. I understand that my child's name may be shared with the photographer to individualise proof cards. | YES | NO |
| I give consent to my child's picture being uploaded onto the school's database. I understand that this will mean that my child's picture will be uploaded onto the school's payment system and Medical Tracker | YES | NO |
| I give consent to my child's photograph being taken as part of a class group which will be offered for sale to all members of my child's class. | YES | NO |
| I give consent for photographs and video recordings to be made of my child and used to support teaching and learning, which may be used on displays around the school. I understand that my child will not be named on displays. | YES | NO |
| I consent for photographs of my child (taken while in school or participating in a school event) to be used in the school brochure. I understand that my child's name will not be published. | YES | NO |
| I give consent for images of my child (taken while in school or participating in a school event) to appear on the school website. I understand that the images will not be named. | YES | NO |
| I give consent for images of my child's work to appear on the school website. I understand that my child's name will not be published. | YES | NO |
| I give consent for a photograph of my child to appear on a related educational website (e.g. Hinchbrook School). I understand that my child's name will not be published. | YES | NO |
| I give consent for a photograph of my child participating in a school event to appear in the local press, both paper and online editions. I understand that I will be asked for specific consent if the press wish to publish my child's name with the photograph. | YES | NO |

6. Permission to photograph children in a school performance

We need your agreement that any photographs taken by you in school at a school performance or assembly will be purely as a memento for personal use and will NOT be published on a social networking site or in any other form. Restrictions on when photography may take place will be announced at the start of a performance or assembly. No video footage may be taken.

| | | |
|--|---------|------------|
| I agree to abide by the school's conditions for photographing children and will not sell or display any photograph taken in school, including on social media. They will be kept purely as a personal memento. | I Agree | I Disagree |
|--|---------|------------|

DECLARATION: I have read all six sections above and have indicated my level of consent in each. I understand that I may withdraw or amend my consent at any time, in writing to the school office.

| | | |
|-----------|--|-----------------|
| Signature | | Parent/Guardian |
| Date | | |

| | | | | |
|-----------------|--|--|--|--|
| Office use only | | | | |
|-----------------|--|--|--|--|

BRAMPTON VILLAGE PRIMARY SCHOOL

Emergency Contact Details

(No parental responsibility)



Child's Name

Date of Birth

CONTACT
PRIORITY
NUMBER

EMERGENCY CONTACT DETAILS

Title

Surname

Forename

Home Address

Postcode

Telephone
Numbers

Home

Mobile

Work

*Please rank to
indicate the best
number on which
contact you*

I consent to my contact details being held on the pupil database of Brampton Village Primary School in case of an emergency in relation to the above named child. I understand that this consent will last until the child leaves the school or the child's parent nominates an alternate emergency contact or I notify the school in writing that I wish my contact details to be deleted.

Signed:

Date:

BRAMPTON VILLAGE PRIMARY SCHOOL

Emergency Contact Details

(No parental responsibility)



Child's Name

Date of Birth

CONTACT
PRIORITY
NUMBER

EMERGENCY CONTACT DETAILS

Title

Surname

Forename

Home Address

Postcode

Telephone
Numbers

Home

Mobile

Work

*Please rank to
indicate the best
number on which
contact you*

I consent to my contact details being held on the pupil database of Brampton Village Primary School in case of an emergency in relation to the above named child. I understand that this consent will last until the child leaves the school or the child's parent nominates an alternate emergency contact or I notify the school in writing that I wish my contact details to be deleted.

Signed:

Date: