

Headlands Primary School Admission Form

Thank you for choosing Headlands Primary for your child. The school is required under the General Data Protection Regulations (GDPR) to ensure that personal data we collect is used in an appropriate manner and kept securely. The individuals whose data we use are encouraged to keep their information up to date and inform the school of any changes. Further information on how we use your information and who we share it with can be found in the NPAT GDPR Parent Privacy Notice on the school website.

www.headlands.org.uk

Please complete **all sections** of this form to ensure we have all of the information we require.

Section 1: Your Child's Details

Information Relating to your Child			
Legal Surname		Preferred Surname	
Legal First Names		Preferred First Name	
Year Group		Class	
Date of Birth		Gender	
Address where child lives			
Postcode			
Country of Birth		Nationality	
Name and address of previous school/nursery			

Section 2: Family Details

Are parents separated/divorced?					
Has a court order been issued?					
Position of child in family (e.g. 1 st , 2 nd , 3 rd)					
Other children in the family					
Name:		DOB:		School:	
Name:		DOB:		School:	
Name:		DOB:		School:	
Name:		DOB:		School:	



Section 3 - Contacts

Emergency Contact – Priority 1			
Title (Mr/Mrs/Ms)		Home Phone	
First Name		Mobile Phone	
Surname		Work Phone	
Email Address			
Address			
Postcode			
Relationship to child			
Does the person above have parental responsibility for the child in Section 1?			

Emergency Contact – Priority 2			
Title (Mr/Mrs/Ms)		Home Phone	
First Name		Mobile Phone	
Surname		Work Phone	
Email Address			
Address			
Postcode			
Relationship to child			
Does the person above have parental responsibility for the child in Section 1?			

Emergency Contact – Priority 3			
Title (Mr/Mrs/Ms)		Home Phone	
First Name		Mobile Phone	
Surname		Work Phone	
Email Address			
Address			
Postcode			
Relationship to child			
Does the person above have parental responsibility for the child in Section 1?			



Emergency Contact – Priority 4

Title (Mr/Mrs/Ms)		Home Phone	
First Name		Mobile Phone	
Surname		Work Phone	
Email Address			
Address			
Postcode			
Relationship to child			
Does the person above have parental responsibility for the child in Section 1?			

Section 4: Child’s Medical Details

Medical Details

Doctor’s Name		Phone No	
Doctor’s Surgery			
Address			
Medical Conditions of child			
Dietary Needs			
Does your child have any long standing illnesses, health problems or disabilities which mean that they have substantial difficulties with any areas of his/her life?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Has an Educational Healthcare Plan (EHC) or Statement of Special Educational Needs been issued in respect of your Child?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Does your child receive any additional Learning Support in school?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Section 5: Ethnically Based Statistics

Please tick the most appropriate boxes below that relates to your child.

Ethnic Origin of Child

British	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	White/Black African	<input type="checkbox"/>
Gypsy/Roma	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Irish	<input type="checkbox"/>	White/Black Caribbean	<input type="checkbox"/>
Other Black African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Irish Traveller	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>
Other Ethnic Group	<input type="checkbox"/>	Somali	<input type="checkbox"/>	Vietnamese	<input type="checkbox"/>	Any other Black background	<input type="checkbox"/>
White/Asian	<input type="checkbox"/>	Any other White background	<input type="checkbox"/>	I do not wish to have this information recorded			<input type="checkbox"/>

Language normally spoken in the child’s home	
First Language of child	
Religion of child	



Section 6: Transport

Pupil's Usual Mode of Transport to and from School						
Walk		Public Bus Service		Cycle		Other (please specify below)
Car		Taxi		Car Share		

Section 7: Consents

A - Parent Communication and Payment System		
We use a service called Schoolcomms to communicate directly with parents by email and texts and a service called School Gateway to take payments for school trips. This service is compliant with GDPR. There is no advertising or cost associated with School Gateway. You will receive two separate automated emails from Schoolcomms and School Gateway and you will need to follow the steps to register for both.		
I confirm that my email address can be supplied to Schoolcomms for the purposes of school communication regarding my child as stated on this form and that my email address will be stored on our SIMs system for the duration of my child's attendance at Headlands Primary. After this time, we will delete your details from our Schoolcomms system.	I agree <input type="checkbox"/>	
I confirm that my mobile telephone number can be supplied to for the purposes of school communication via text regarding my child as stated on this form and that my mobile phone number will be stored on the Schoolcomms system for the duration of my child's attendance at Headlands Primary. After this time, we will delete your details from our Schoolcomms system.	I agree <input type="checkbox"/>	
I confirm that my child's following information can be supplied to Schoolcomms for the purposes of school communication and that these details can be stored on Schoolcomms for the duration of my child's attendance at Headlands Primary. After this time, your details will be deleted.		
Child's Full Name	I agree <input type="checkbox"/>	
Child's Date of Birth	I agree <input type="checkbox"/>	
Child's Year Group	I agree <input type="checkbox"/>	
Child's Class	I agree <input type="checkbox"/>	
B - Parent/Carer/Child Acceptable Use Agreement		
As part of an enriched curriculum, your child will be accessing the internet, school email and virtual learning environment via a filtered service. In order to support the school in educating students about the safe use of the internet, we are asking parents and children to read and sign acceptance of these rules below.		
The rules provide an opportunity for further discussions with your child about safe and appropriate use of the internet and other online tools (e.g. mobile phones), both within and beyond school (e.g. at a friend's house or at home). Sanctions in place for misuse of technologies and subsequent breach of the rules are detailed in the full Acceptable Use of Technologies Policy. A copy of this can be downloaded from the school website. www.headlands.org.uk		
Child Agreement (to be completed with children who are Key Stage 2 or above)		
I understand the rules for using the internet and email safely and responsibly.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I know the adults working with me at school will help me to stay safe and check I am using the computers to help me with my work.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Parent/Carer Agreement		
I have read and discussed the rules with my child and confirm that he/she has understood what the rules mean.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand that the school will use appropriate filtering and ensure appropriate supervision when using the internet, email and other online tools.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand that filtering can never be completely fool-proof and occasionally inappropriate materials may be accessed. I accept that the school will endeavour to deal with any incident that may arise swiftly and according to policy.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I understand that my child's safe use of the internet and online technologies outside of school is my responsibility.	Yes <input type="checkbox"/>	No <input type="checkbox"/>



C - School Visits

From time to time, the school will take classes of children on local visits to enhance curriculum. Your child will always be under the supervision of a member of the school staff.

I give consent for my child to be taken off the school site for visits to local places of interest.	Yes	<input type="checkbox"/>
I give consent for my child to travel in the school minibus for the purpose of school activities.	Yes	<input type="checkbox"/>

D - Child Internet Access

Your child will access the Internet as part of the school curriculum in line with E-Safety Guidance and the school's Internet Acceptable Use Policy. When in Key Stage 2, to enhance the curriculum your child may watch films that are 'PG' rated, subject to the teacher's judgement.

I confirm my child can access the internet at school.	Yes	<input type="checkbox"/>
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E - Free School Meals

Your child automatically receives a Free School Meal if they are in Key Stage 1. When they finish Key Stage 1, they still may qualify for a free school meal. If so, we will need your National Insurance number. For more information – please visit www.gov.uk/apply-free-school-meals.

I confirm my child is eligible for Free School Meals after Key Stage 1.	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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F - Photographs

The school may wish to use photographs of pupils engaged in school activities and trips and on the Headlands Primary websites, school social media and blogs, displays around the school, press, school promotional materials and performance DVD's. These photos may be used for up to one academic year after your child leaves the school. In order to be compliant with GDPR we need to seek your consent to use your child's photo. For further details please refer to the NPAT GDPR Parent Privacy Notice.

I confirm that my child's photograph can be used on the school website	I agree	<input type="checkbox"/>
I confirm that my child's photograph can be taken and be used on the following social media sites and blogs used by the school Facebook, Headlands Blog and Twitter	I agree	<input type="checkbox"/>
I confirm that my child's photograph can be taken and be used on in press articles that are approved by the school	I agree	<input type="checkbox"/>
I confirm that my child's photograph can be taken and be used on school promotional materials	I agree	<input type="checkbox"/>
I confirm that my child's photograph can be taken and be used for school performance DVDs	I agree	<input type="checkbox"/>

G – Early Years Foundation Stage - this section applies to children in Reception Classes only

This school uses the Interactive Learning Diary system to share information about your child's development in the reception year.

I confirm that my email address can be supplied to Interactive Learning Diary and that my email address will be stored on the Interactive Learning Diary system for the duration of my child's attendance in reception at Headlands Primary School. After this time, we will delete your details from the system.	I agree	<input type="checkbox"/>
I confirm that my child's name can be supplied to Interactive Learning Diary	I agree	<input type="checkbox"/>
I confirm that my child's date of birth can be supplied to Interactive Learning Diary	I agree	<input type="checkbox"/>
I confirm that my child's photographs can be supplied to Interactive Learning Diary	I agree	<input type="checkbox"/>
I confirm that my child's class name can be supplied to Interactive Learning Diary]	I agree	<input type="checkbox"/>
I confirm that my child's progress will be shared with me confidentially via [Interactive Learning Diary	I agree	<input type="checkbox"/>
I confirm that group photographs taken within the reception year may be shared in their classmates learning journeys.	I agree	<input type="checkbox"/>
I confirm that my child's name may be shared with other reception families for the purpose of planning birthday parties and Christmas card lists	I agree	<input type="checkbox"/>



H-Food Tasting and Birthday Treats

Throughout the school year children are given the opportunity of tasting and handling various foods. We need your permission to allow your child to participate. (Please notify us of any allergies your child may have in the space below).

I confirm that my child is allowed to taste various foods and that I have listed any allergies above.

I agree

Signature

Name

Date

School Office Use Only:

Admission Date

UPN Number

House

Admission Number

Birth Certificate Verification

Entered in SIMS

Entered on Schoolcomms and
School Gateway

Copy to EAL Co-ordinator/Class
Teacher