



Office use:

Year Tutor Start date: 

Previous school:

UPN:

NCC ref:

## Admission form

Please ensure all sections are completed with full details in block capitals to ensure your child can access all Academy resources. Please notify the Academy of any changes to this information which occur during the course of your child's school career.

### Student's details

Student's surname	<input type="text"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Student's forename	<input type="text"/>	Middle name	<input type="text"/>
Student's address	<input type="text"/>		
		Postcode	<input type="text"/>
Home phone	<input type="text"/>	Date of birth	<input type="text"/>
Former school	<input type="text"/>		

### Parent / carer details and contact information

The Pupils' Registration Regulations (1988) require us to record all possible parental names. Please give details of all persons who have **parental responsibility** (parents/carers) for the student, including those not living at the student's address. Please also state the relationship to the student (ie mother, father etc). In order to keep you informed of all the important events that affect your child we use **Groupcall Messenger**. This facility can send text messages to your phone or electronic versions of letters to your email account. All messages will be sent to the contact detailed as priority 1. Nothing can replace a telephone call when it is needed and mobile text messaging will only be used in appropriate situations. Examples of this might be:

- If your child is absent or late without authorisation,
- Same day/next day detentions
- Changes or cancellation of Academy activities,
- Academy closures of any kind

### Contacts in order of priority – Only for contacts with parental responsibility (other contacts should be added overleaf).

1	Name and title	<input type="text"/>	Relationship	<input type="text"/>
	Address	<input type="text"/>		
			Postcode:	<input type="text"/>
	Mobile	<input type="text"/>	Parental Responsibility: YES <input type="checkbox"/>	NO <input type="checkbox"/>
Home phone	<input type="text"/>	Email	<input type="text"/>	

2	Name and title	<input type="text"/>	Relationship	<input type="text"/>
	Address	<input type="text"/>		
			Postcode:	<input type="text"/>
	Mobile	<input type="text"/>	Parental Responsibility: YES <input type="checkbox"/>	NO <input type="checkbox"/>
Home phone	<input type="text"/>	Email	<input type="text"/>	

Are any of the parents listed above employed in the Armed Forces?

Yes No

## Correspondence name(s)

Name and title of person(s) to whom letters should be addressed

## Court order

Name and title of any person(s) with restricted access to student/applicant as a result of a court order. A copy of the order will be required.

## Brothers and sisters

Please list the names of all brothers or sisters of this child currently at the Kingswood Secondary Academy:

Full names

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

## Additional emergency contact list

If an emergency occurs at the Academy and it is not possible to contact a parent/carer, please indicate below another responsible adult that may be easily contacted during the day and who would be available to collect your child if necessary. Add the name(s) of any person who may be contacted in an emergency to act on your behalf. Please place them in the order you wish them to be contacted in an emergency.

3

Name and title

Relationship

Home phone

Mobile

4

Name and title

Relationship

Home phone

Mobile

## Ethnic origin, home language and religion

The Department of Education requires information about the ethnic make-up of each school. Please tick the most appropriate box (i.e. 'White British – students born in the UK'). **If you do not consent to the sharing of this information, please tick the 'Refused' box provided below.**

Any other Asian background

Black Caribbean

Other Ethnic group

White/Irish

Any other Black background

Chinese

Pakistani

White/Asian

Any other Mixed background

Gypsy

Roma

White/Black African

Any other White background

Gypsy/Roma

Traveller of Irish heritage

White/Black Caribbean

Bangladeshi

Indian

Vietnamese

Black Somali

Other Black African

White/British

Refused

Home language

Religion

Nationality

Country of Birth

First language

Date first entered UK

## Medical information

Please provide the contact details for your child's doctor, and any medical conditions that the Academy should be aware of. If your child needs to take medication during the school day, please complete an additional 'Administration of Medicines' form. These two forms, together, constitute an individual health care plan for your child.

Name of GP Practice

Doctor's name

Address

Telephone

Details of medical condition

## Looked After Children

If your child is a 'Looked After Child', please provide the name of the Social Worker, their contact details and the Authority to which they have been assigned.

Social Worker's name

Authority

Address

Telephone

## Young Carer

Does your child help care for another member of the family? If so, who?

Yes

No

Who

## Travel arrangements to school

Please advise which mode of transport your child takes the majority of the time to arrive to school.

## Free school meals

Is your child entitled to free school meals?

Yes

No

## Educational support

Has your child received support for his/her educational needs?

Yes

No

If yes, please give details below:



**Photographic and film consent**

Please read the information below and then complete the declaration in block capitals and black ink.

**Photographic and film consent**

To comply with the General Data Protection Regulations 2018, we need to make you aware that from time to time we may photograph or film your child undertaking Academy activities.

The Academy may photograph your child for the purpose of identification in the Academy's management information system.

The Academy may also use photographs and film for monitoring or educational uses (eg curriculum subjects requiring video and photographs to be submitted to external examiners). The Academy does not require parental consent for these purposes as they are deemed to be public interest.

The use of photographs and films of your child for other purposes, such as celebration of events or exemplary work, require consent and you should tick the appropriate boxes below if you are willing to give such consent.

**Photographic and film consent declaration**

Student's Name:

I give my consent for the Kingswood Secondary Academy and the Greenwood Academies Trust to use photographs and films of the above named child on the following social media platforms (*please tick the appropriate box*):

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Facebook	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Twitter	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Instagram
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I give my consent for the Kingswood Secondary Academy/ Greenwood Academies Trust to use photographs and films of the above named child in the following ways (*please tick the appropriate box*):

<input type="checkbox"/> Yes	<input type="checkbox"/> No	on the Academy website
<input type="checkbox"/> Yes	<input type="checkbox"/> No	on the Greenwood Academies Trust website
<input type="checkbox"/> Yes	<input type="checkbox"/> No	in any Academy/Trust promotional material – eg prospectus
<input type="checkbox"/> Yes	<input type="checkbox"/> No	in the Academy on wall displays
<input type="checkbox"/> Yes	<input type="checkbox"/> No	in the Academy on TV screens
<input type="checkbox"/> Yes	<input type="checkbox"/> No	in the local press
<input type="checkbox"/> Yes	<input type="checkbox"/> No	in the national press

I have read and understood the information above. I understand that it is my responsibility to notify the Academy if I change my mind about withdrawing or granting consent at any time in the future.

Parent/ Carer name

Parent/ Carer signature  Date



# KINGSWOOD SECONDARY ACADEMY

## Sporting Event Consent form

This form is for students that take part in extra-curricular PE activities or fixtures against other schools. Please complete the following details and declaration in block capitals and black ink.

### Parent / carer information

The Physical Education Department often takes students out on visits in connection with their studies or as an extra-curricular activity or fixture against another school. To make this organisation a little less complicated we ask that you sign the Consent Form below. This covers any sporting events and visits in which your child may be involved. Such visits would always be accompanied by a member of Kingswood staff and would be either on foot or by coach/minibus for which there would be no charge to yourselves. Your child will then be dismissed from Kingswood on return. We would, of course, still inform you if your child was going to be involved in an extra-curricular visit or fixture, but there would be no need for you to reply each time. Your consent and medical information will remain valid until you inform us of your wish to cancel the arrangement, or of any additional medical information changes.

### Student details

Student's full name

Tutor group

Please **delete** any subject you are **not** granting permission for your child to take part in. Your child will not be permitted to participate in any event you have deleted.

Football

Rounders

Volleyball

Cricket

Badminton

Tennis

Softball

Netball

Table Tennis

Rugby

Athletics

Basketball

By signing this form and completing the information below I give consent for my child to participate in the events named above and will make arrangements for his/her safe return home after each event. I will notify the school if any changes occur.

#### Questions

Only tick this box if you **DO NOT** provide permission to seek emergency medical treatment?

Only tick this box if you **DO NOT** agree to your child having remote supervision?

Does your child have any medication or other allergies?\*

YES

NO

Does your child have any know illnesses?\*



Does your child require to carry medication?\*



Has your child had any fractures within the last 12 weeks?\*



Do you wish to convey other medical details privately?\*



If you have answered yes to any medical questions (\*), please expand below or on a separate sheet of paper.

### Declaration

- I have read the information about the sporting events and I agree to my child taking part in the events included above. I declare my child fit enough to undertake the activities.
- I will notify the organiser of any ailment, allergy, condition or diet, which requires the attention of the organiser.
- I authorise the organiser to act on my behalf in an emergency and to sign on my behalf any consent forms required by medical authorities if they know that it would not be advisable to wait for my own signature.

Parent full name

Signature

Date



# KINGSWOOD SECONDARY ACADEMY

## Biometric data consent

Please read the following information and complete the declaration in block capitals and black ink.

### Biometric data consent

In line with many academic establishments across the country, the Kingswood Secondary Academy uses a biometric data system (based upon fingerprint recognition technology) around the school. These include (but may not be exclusive to) paying for food, printing and library services. This works by taking measurements of the fingerprint but does not capture a complete image, meaning that the original fingerprint cannot be reconstructed from the data.

The Academy requires the written consent of a Parent/Carer before we may collect and process the biometric data of any student. In no circumstances can a child's biometric data be processed without written consent. A suitable alternative will be provided to any student where consent is not given. Please refer to our Biometric Policy for full information.

Please complete the section and declaration below, indicating the preferred method of accessing school systems in the Academy.

Please note that even if a parent has given written consent to the processing of their child's biometric data the Academy will be obliged to substitute this with an alternative in the following situations:

- Your child objects to having their fingerprint taken on the day
- You or your child later objects to using their fingerprint as a method of accessing school systems
- A parent has objected in writing to such processing, even if another parent has given written consent.

Our online secure payment system, sQuid, offers you the freedom to make payments whenever you like through a secure account using your debit/credit card for cashless catering, trips, bus passes etc. Making a payment is straightforward and the system holds an electronic record of your payments for you to view. You will be able to check your child's balance and purchases.

Alternatively, cash can still be deposited on the Academy site using the cash machines in the Atrium or handing in at the Finance Office.

As soon as your child joins the Academy you will be provided with the details for your account.

### Biometric data consent declaration

Student's surname

Student's forename

Middle name

Please tick one of the two boxes below:

I hereby give consent for the collection and processing of biometric data for the student detailed above for use with school systems.

I do not give consent and would like my child to be provided with a suitable alternative instead of using their fingerprint.

Parent's full name

Signature

Date



Please read the Home/ Academy agreement below and sign to accept its terms.

**The agreement**

**Parents/ Carers - we will**

- ensure that our child attends the Academy regularly, on time and properly equipped
- support out-of-regular-hours events such as additional tuition or enrichment activities
- refrain from using social media to air any issues or concerns we may have with the Academy and will contact the Academy in the first instance
- inform the Academy of any concerns or problems that might affect our child's work, behaviour or attendance
- support the Academy policies, particularly those on behaviour, dress and appearance
- support homework and encourage other home-learning opportunities
- attend parents' evenings and contribute to other discussions about our child's progress
- take an active interest in life at the Kingswood Secondary Academy and the part your child plays in it

**Student - I will**

- attend the Academy regularly, on time and with the right attitude to learn
- bring all the equipment I need every day and a rucksack in which to keep it
- wear the full Academy uniform and be tidy in appearance
- complete all classwork and homework as well as I can
- be polite and courteous to others and do as my teachers tell me
- respect the feelings, views and property of others in the Academy
- help to keep the Academy free from litter, graffiti and vandalism
- respect the Academy's computer network
- ensure that letters and information from the Academy reach my parents/ carers

**Kingswood Secondary Academy - we will**

- provide a safe, caring and stimulating environment for your child
- ensure your child achieves their potential as a valued member of the Academy community
- provide a broad and balanced curriculum and meet your child's individual needs
- encourage your child to achieve high standards of work and behaviour, through building good relationships and developing a sense of responsibility
- keep you informed about Academy matters and about your child's progress in particular
- promote a wide range of extra-curricular activities
- be open and welcoming at all times
- listen to parental concerns and work in partnership with you to support your child
- offer opportunities for you to become involved in the life of the Academy

**Declaration and signatures**

I have read the above agreement and agree to abide by its terms.

Parent/ carer

Date

Student

Date

Academy

Date



## Emergency Closure

Please read the information below and then complete the following details in block capitals and black ink.

### Emergency closure information

During the winter months, weather conditions are very changeable, unpredictable and there is the potential to close the Academy in the interests of everybody's health and safety. There may be times when the Academy day has started but during the day the weather deteriorates to a point where it is necessary to close before 3.10pm. We would quite clearly only take a decision to close in the most extreme circumstances and would always endeavour to remain open if at all possible.

In order to support effective communication in these situations we will use text messages to ensure that all parents and carers are aware of our decision to close the Academy. We will also place a notice on the main page of the Academy website and Twitter, and contact local news and radio stations where appropriate.

If you are happy for us to send your child home in the case of extreme weather or emergency, after these automated messages have been sent, please complete the permission slip attached and return it via your child's form tutor. We will endeavour to arrange the usual Academy transport but this cannot be guaranteed as they may have other commitments at the time or may be unable to get to us due to the weather conditions. Therefore it is advisable that you discuss with your child emergency arrangements to ensure there is no misunderstanding about how to return home in such circumstances.

### Emergency closure consent

Student's full name

I **DO** give permission for my child to be sent home if in the event of extremely adverse weather conditions the Academy has to close before 3.10pm.

I would prefer my child to remain onsite until 3.10pm. I am aware that I may have to make alternative arrangements for my child to return home if they normally use Academy or public transport, as these services may not be able to operate at 3.10pm.

I have read and understood the information above and am signing this form as a parent or carer, who represents the student named above and his/her best interests.

Parent/carer full name

Signature

Date

### Parent/Carer Declaration:

I confirm the information contained in all sections of this form is accurate and no relevant facts have been withheld. I understand that any inaccuracies may result in a delay in the admissions procedure.

I have read and understood the information and am signing this form as a parent or carer, who represents the student named above and his/her best interests. I understand that it is my responsibility to notify the Academy if I change my mind about withdrawing or granting permission at any time in the future.

Parent/Carer's full name

Signature

Date