

ADMISSION FORM

Your child's birth certificate should be presented at the same time as this form.

Pupils legal surname:	Male • Female •
Forenames: (underline the name used)	
Date of Birth:	Birth Certificate checked at school Y • N • (office use only)
Child's Permanent Address (including postcode):	
With whom does the child live?	
Mother: (Name)	Father: (Name)
Date of Birth:	Date of Birth:
Address (if different from above)	Address (if different from above)
Post Code:	Post Code:
Telephone Numbers	Telephone numbers
Home:	Home:
Mobile:	Mobile:
Work:	Work:
Email address:	Email address:
Does the child have a sibling at this school? Yes • No •	
Name of Sibling(s):	
Previous School attended:	
Reason for leaving:	
Date left:	

Is the child resident with foster parents? Yes • No •

If 'Yes' which Authority is financially responsible for maintenance?

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Details of any other persons with parental responsibility (see note)

Name:
Address:
Post Code:
Telephone Number:

OTHERS WITH PARENTAL RESPONSIBILITY AS DEFINED BY CHILDREN ACT 1989

Parental responsibility may be shared between a number of people beyond the child's natural parents. Married parents have equal parental responsibility on separation or divorce, both parents continue to have responsibility. Unmarried fathers may acquire parental responsibility in one of five ways:

- a) by making a parental responsibility agreement with the mother
- b) he may apply to Court for an order which gives him parental responsibility
- c) by marrying the mother
- d) by being made a guardian
- e) by obtaining a residence order

INFORMATION RELATING TO CHILDREN NOT LIVING PERMANENTLY WITH THEIR PARENTS IN KENT

(including children of service personnel)

If the child's residence at the present address (whether living with parents or any other person) is not permanent, please state the reason and probable duration of the stay and give the address of the person with whom the child normally resides:

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Please attach a copy of any court orders relating to your child.

SIGNATURE OF PERSON WITH LEGAL RESPONSIBILITY _____

PRINT NAME _____

DATE _____

HEALTH/MEDICAL INFORMATION

Details of two persons willing to be contacted in case of emergency if parent not available.

Name:	Name:
Address:	Address:
Telephone numbers: Home Mobile Work	Telephone numbers: Home Mobile Work
Relationship to child:	Relationship to child:

Details of child's doctor and any other clinic/hospital that the child attends.

Doctor's name:
Surgery:
Tel No:
My child is allergic to: _____
My child suffers from: _____
My child has a medical need which has lasted or is expected to last more than twelve months and takes regular medication YES • NO •
My child regularly takes the following medication: _____
Date of my child's last anti-tetanus injection: _____
Please do not let my child have any of the following foods/drink:
<div style="border: 1px solid black; height: 30px; width: 100%;"></div>
In the event of my child requiring emergency treatment and the head teacher (or his/her representative) being unable to contact me, I give consent for the member of staff accompanying my child to approve the application of any emergency treatment including anaesthetic advised by the medical authorities for the well-being of my child.
Signed _____ Parent/Guardian Date _____

TYPE OF MEAL: Free School Meal • Paid School Meal • Packed Lunch •

Any special dietary requirements vegetarian/no pork etc. _____

MODE OF TRANSPORT TO SCHOOL: Car/Van • Car Share • Taxi • Walk • Bus •

ETHNIC MONITORING INFORMATION

All schools are required by the Department for Education to collection information on pupil’s ethnic background.

Please tick **only one** of the boxes below that applies to the child.

White:					
English		Bosnian-Herzegovinian		Turkish	
Scottish		Croatian		Turkish Cypriot	
Welsh		Greek		White Eastern European	
Other White British		Greek Cypriot		White Western European	
Irish		Gypsy/Roma		White Other	
Traveller of Irish Heritage		Kosovan			
Albanian		Portuguese			
Asian or Asian British:					
Indian		African Asian		Sri Lankan Tamil	
Pakistani		Nepali		Sri Lankan Other	
Bangladeshi		Sri Lankan Sinhalese		Other Asian	
Black or Black British:					
Caribbean		African		Any other black background	
Chinese:					
Chinese					
Any other ethnic group:					
Afghan		Iraqi		Malay	
Arab other		Japanese		Thai	
Egyptian		Kurdish		Vietnamese	
Filipino		Latin/South/Central American		Any other ethnic group	
Iranian		Lebanese			

Pupil Nationality _____

National Identity _____

Country of Birth _____

Pupil Religion _____

PUPIL FIRST LANGUAGE INFORMATION

Please tick **one box only** below to indicate the **first language** of your child.

Albanian/Shqip		Hindi		Romanian (Moldova)	
Arabic (any other)		Italian (any other)		Romanian (Romania)	
Arabic (Algeria)		Italian (Napoletan)		Russian	
Arabic (Iraq)		Italian (Sicilian)		Bosnian	
Arabic (Morocco)		Japanese		Croatian	
Arabic (Sudan)		Kurdish (any other)		Serbian	
Arabic (Yemen)		Kurdish (Kurmanji)		Shona	
Bengali (any other)		Kurdish (Sorani)		Slovak	
Bengali (Chittagong/Noakhali)		Lithuanian		Somali	
Bengali (Sylheti)		Latvian		Spanish	
Bulgarian		Malayalam		Swahili (any other)	
Chinese (any other)		Nepali		Comorian Swahili	
Chinese (Cantonese)		Pashto/Pakhto		Swahili (Kingwana)	
Chinese (Hokkien/Fujianese)		Panjabi (any other)		Swahili (Brava/Mwiini)	
Chinese (Hakka)		Panjabi (Gurmukhi)		Swahili (Bajuni/Tikuu)	
Chinese (Mandarin/Putonghua)		Panjabi (Mirpuri)		Swedish	
Czech		Panjabi (Pothwari)		Tamil	
English		Polish		Filipino	
Finnish		Portuguese (any other)		Tagalog	
French		Portuguese (Brazil)		Thai	
German		Farsi/Persian (any other)		Traveller Irish/Shelta	
Greek (any other)		Dari Persian		Turkish	
Greek (Cyprus)		Tajiki Persian		Urdu	
Gujarati		Roman/English Romanes		Vietnamese	
Hungarian		Romani (International)			

Proficiency in English:

- New to English •
- Early Acquisition •
- Developing competence •
- Competent •
- Fluent •
- Not yet assessed •

Consent form

Name of child _____

Photograph Consent

I give permission for my child to be photographed by adults and pupils in school.

I recognise that the photographs will include their first name only and that photographs will only be held within school.

I give permission for my child's photograph to be used for display in school and in pupils work.

I give permission for my child's photograph (or video footage) to be used in school publications, in press releases and placed on the school website. I recognise that pupils will not be named in full, in any publicised photographs.

Please note that websites can be viewed throughout the world and not just in the United Kingdom where UK law applies. We reserve the right to use photos for promotional purposes until such permission is withdrawn.

I give permission for my child to be included in all official class photographs.

School Trips Consent

I agree for my child to go on any school trips during school time (this does not include residential trips).

Signed(parent, guardian) Date

I agree for my child to participate in any school sports competitions which are held outside school.

Signed(parent, guardian) Date

Contact Number in case of emergency: _____

Medical Consent

Should the necessity arise in the event of injury or illness I give consent for the adult in charge to allow any medical treatment to be given which in the opinion of a qualified medical practitioner may be necessary.

Signed(parent, guardian) Date

My child has the following medical conditions/allergies: _____

Film Consent

On the occasion that films are watched in class, I give permission for my child to watch a PG rated film.

Signed(parent, guardian) Date

Consent for transport in Staff vehicles (occasional use) or school minibus

I confirm that I have no objection to my child being transported to or from the venue by named members of staff who have had clearance by the Headteachers and also have the correct insurance on their policy for this purpose.

Signed(parent, guardian) Date

OTHER INFORMATION

Permission to check for head lice YES • NO •

Permission to participate in a programme of puberty and relationship advice and education, which is given to the children when in Upper Key Stage 2 (Years 5 & 6) YES • NO •

TKAT and its schools are fully committed to complying with the EU General Data Protection Regulation.

We have implemented an Information Governance Framework to ensure that we have the correct policies, procedures, publications and tools to be compliant. Additionally, all of our staff have access to data protection and cyber security training.

At www.tkat.org/GDPR you will find each of our main privacy notices.

If you have any questions or comments, please contact dataprotection@tkat.org and we will do our best to help you.

PUPIL ACCEPTABLE USE POLICY

ALL pupils must follow the rules in this policy when using school resources; computers and electronic devices and network resources such as the internet.

Pupils that do not follow these rules may find:

- They are not allowed to use the school's resources
- They can only use school resources if supervised.

Staff will show pupils how to use the school's resources in line with its on-line safety policy.


Our Rules:

1	I will always use polite language when using computers.
2	I must not write anything that might upset someone or damage the school's reputation.
3	I know that staff will regularly check what I have done on the computers.
4	I know that if a member of staff thinks I may have been breaking the rules they will check on how I have used computers before.
5	I must not tell anyone my name, where I live or my telephone number on-line.
6	I must not tell my username and passwords to anyone but my parents, carers or guardians.
7	I must never use other people's usernames and passwords or computers left logged in by them.
8	If I think someone has learned my password then I will tell a staff member.
9	I must log off after I have finished with a computer.
10	I must not use the computers in any way that stops other people using them.
11	I will report any websites or on-line materials that 'don't seem right' to a member of staff.
12	I will tell a member of staff straight away if I am sent any messages that 'don't seem right'.
13	I will not harm any resources or the work of another person on a computer intentionally.
14	If I find something that I think I should not be able to see, I must tell a member of staff straight away and not show it to other pupils.
15	I will not start any on-line conversations with anyone if it 'doesn't seem right'.
16	I will not post anything on-line that might harm me or someone else.

Unacceptable Use:

There are several examples of 'unacceptable use', these include, but are not limited to:

- Using equipment with another person's username and password
- Creating or sending on the internet any messages or materials that might upset other people
- Looking at or altering work that belongs to another pupil without their permission.

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I agree to follow the above rules and to be sensible in my use of school resources in particular for my own safety. I agree to report misuse. I agree to tell staff if I see materials on-line that make me feel uncomfortable or 'don't seem right'. If I do not follow the rules I understand that I might not be allowed to use the school's resources. I understand that misuse may require future monitoring or any past use investigated.

Student Name: _____

Parent/Carer/ Guardian signature: _____ Date: _____

PARENTAL PERMISSION TO COLLECT

Child's name _____ Class _____

Please could you list the names of all people who are authorised to collect your child from school, (including yourself) and their relationship to your child (e.g. aunt, uncle, grandmother etc.)

I give permission for the following people to collect my child from school:

NAME	RELATIONSHIP	ADDRESS	PHONE NUMBER

SIGNED _____ DATE _____

PRINT NAME _____

If a person is not on the list we will not be able to release the child until we have confirmation from you so please make sure you keep this list up to date by informing the class teacher and the school office.

Thank you