



## ADMISSION FORM

<b>Legal Surname:</b>  <b>Chosen Name:</b> <i>(if different from Forename)</i>  <b>Date of Birth:</b>  <b>Home Address:</b>  <b>Postcode:</b>	<b>Legal Forename</b>  <b>Middle Name:</b>  <b>Surname at Birth if Different:</b> <i>(Please provide copy of Birth certificate)</i>  <b>Male/Female</b> <i>(please delete as applicable)</i>  <b>Main Daytime Contact Number:</b>	For Office Use  Admission Date:  Year:  Tutorial:
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**CONTACTS:** Please list in the order in which you wish contact to be made in the case of an emergency. Please ensure that you record ALL addresses and telephone numbers where they differ from the above, if they are the same please write 'as above'. Please be aware that ALL persons with parental responsibility MUST be declared as a contact on this form, including absent parents. Additional contacts can be submitted by letter.  
**PLEASE COMPLETE ALL INFORMATION.**

<b>PRIORITY 1</b> (The first person the school will contact with concerns/emergencies)		
Surname: <span style="float: right;">(Mr/Mrs/Miss/Ms/Dr)</span>  Forename:  Home Address:  Postcode:  Email:  Mobile Telephone Number:	Relationship to Student:  Place of Work:  Work Telephone Number: Home Telephone Number:  Parental Responsibility: YES / NO Residency/Court Order in place: YES / NO <i>(Please provide a copy)</i>	
<b>PRIORITY 2</b>		
Surname: <span style="float: right;">(Mr/Mrs/Miss/Ms/Dr)</span>  Forename:  Home Address:  Postcode:  Email:  Mobile Telephone Number:	Relationship to Student:  Place of Work:  Work Telephone Number: Home Telephone Number:  Parental Responsibility: YES / NO Residency/Court Order in place: YES / NO <i>(Please provide a copy)</i>	



<b>PRIORITY 3</b>			
Surname:	(Mr/Mrs/Miss/Ms/Dr)	Relationship to Student:	
Forename:		Place of Work:	
Home Address:		Work Telephone Number:	
Postcode:		Home Telephone Number:	
Email:		Parental Responsibility:	YES / NO
Mobile Telephone Number:		Residency/Court Order in place:	YES / NO
		(Please provide a copy)	

<b>PRIORITY 4</b>			
Surname:	(Mr/Mrs/Miss/Ms/Dr)	Relationship to Student:	
Forename:		Place of Work:	
Home Address:		Work Telephone Number:	
Postcode:		Home Telephone Number:	
Email:		Parental Responsibility:	YES / NO
Mobile Telephone Number:		Residency/Court Order in place:	YES / NO
		(Please provide a copy)	

<b>ADDITIONAL INFORMATION – Please complete and provide additional details by letter</b>				
Young Carer: <input type="checkbox"/>	Service Children: <input type="checkbox"/>	Looked After Student: <input type="checkbox"/>	Parent in Exceptional Circumstances: <input type="checkbox"/>	Adopted from Care: <input type="checkbox"/>
<i>Please advise if Student NOT aware</i>				

<b>CURRENT / PREVIOUS SCHOOL - Please complete</b>	
Name of Current/Previous School: Town: Tel No:	UPN <i>(Please obtain from previous School)</i> Date of Admission: Date of Leaving:

<b>CATERING –Please complete</b>			
Free School Meals: <input type="checkbox"/>	Previously Free School Meals <input type="checkbox"/>	Non Free School Meals: <input type="checkbox"/>	Would like to receive Free School Meal info: <input type="checkbox"/>

<b>TRAVEL TO SCHOOL – Please complete</b>					
Car <input type="checkbox"/>	Dedicated School Bus <input type="checkbox"/> Route No .....	Walk <input type="checkbox"/>	Public Transport <input type="checkbox"/> Route No .....	Bicycle <input type="checkbox"/>	Taxi <input type="checkbox"/>

**MEDICAL INFORMATION - Please also complete the enclosed medical form**

Surgery Name: \_\_\_\_\_ Surgery Address: \_\_\_\_\_  
 Surgery Telephone Number: \_\_\_\_\_ Medical Conditions : No  Yes  *Please provide details on separate Medical Form*

**CULTURAL INFORMATION - Please tick as appropriate**

White English <input type="checkbox"/>	White/Chinese <input type="checkbox"/>	Home Language: <i>(Language Spoken in the Home)</i>
White Scottish <input type="checkbox"/>	White/Asian <input type="checkbox"/>	
White Irish <input type="checkbox"/>	Indian <input type="checkbox"/>	First Language: <i>(Language spoken in early years)</i>
White Welsh <input type="checkbox"/>	Black/Asian <input type="checkbox"/>	
Other White British <input type="checkbox"/>	Black African <input type="checkbox"/>	Religion: <i>(if none put No Religion)</i>
Bangladeshi <input type="checkbox"/>	Black Caribbean <input type="checkbox"/>	
Pakistani <input type="checkbox"/>	Filipino <input type="checkbox"/>	
Any Other Black <input type="checkbox"/>	Other White <input type="checkbox"/>	
Background Chinese <input type="checkbox"/>	Other Asian <input type="checkbox"/>	
White/Pakistani <input type="checkbox"/>	Other Black <input type="checkbox"/>	
White/Black African <input type="checkbox"/>	Other Mixed Background <input type="checkbox"/>	
White/Black Caribbean <input type="checkbox"/>	Traveller <input type="checkbox"/>	
White Eastern European <input type="checkbox"/>	Gypsy/Romany <input type="checkbox"/>	
White Western European <input type="checkbox"/>	Any Other Ethnic Group <input type="checkbox"/>	
Thai <input type="checkbox"/>	Prefer not to give <input type="checkbox"/>	

**SPECIAL NEEDS – Please complete if relevant**

Does your child have any special needs: No  Yes  *(if 'yes' please specify stage and type below)*

Stage: Education Health Care Plan  SEN Support (Prev SA / SA+)  Statement  My Plan / My Plan +

Type: Behaviour  Learning  Disability/Impairment  Medical  Other

**DATA PROTECTION – Please read**

Information held by the School will be used for the purposes of our business as registered under the General Data Protection Regulation (GDPR) and the expected provisions of the Data Protection Act 2018 (DPA 2018) as set out in the Data Protection Bill. A copy of our Privacy Notice explains how we collect, store and use personal data about you and your child is available on the School's website.

We use some web-based products purchased from approved suppliers, as well as subject-specific learning sites. Some sites require us to upload student first and last names and e-mail addresses to their website to access material and/or allow monitoring of student progress. In order to comply with the General Data Protection Regulation we will seek your/your child's permission (once they becomes 16 years old) to use the details in this way.

**All parents:** I agree to Newent Community School and Sixth Form Centre using my child's first and last names and school e-mail address with external software suppliers for educational purposes only, please sign below.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_ Date: \_\_\_\_\_

**Please turn over and complete the "Consent Form – Use of Data, taking and using photographs / videos"**



## Consent Form – Use of Data, taking and using photographs / videos

Name of child: ..... Tutorial: .....

Newent Community School and Sixth Form Centre believes that celebrating the achievement of children in school is an important part of their learning experience and personal development. Taking photographs and videos of students for internal display and displaying student work enables us to celebrate individual and group successes as a school community. We would also like to use photographs and videos of the school and its students to promote the good educational practice of the school. Children’s full names may be published externally with their photographs, and may be published internally (for example, on display with their work).

By signing this form you are consenting to the use of images of your child being used in the following outlets under the terms outlined in section 7 of our Online Safety Protocol which available on our website.

- All school publications
- On the school website
- In newspapers as allowed by the school
- In videos made by the school or in class for school projects

Please read the questions below, circle your answers and then sign and date the bottom of the form.

1. Can we use your child’s photograph in printed publications by Newent Community School and Sixth Form Centre? YES / NO
2. Can we use your child’s photograph on our website, school blogs, or the school’s partnership websites either:
  - In a group or as a member of a whole school activity? YES / NO
  - Individually? YES / NO
3. Can we use your child’s photo for publication in a newspaper? YES / NO
4. Can we photograph and video your child within school, and display these publicly within the school, as part of the curriculum and in class? YES / NO
5. Can we use videos of your children to share good practice with professionals from other schools? YES / NO

This consent form covers consent for the duration of year 7 and year 8 after which we will ask for renewed consent. Once your child leaves the school, photographs and videos may be archived within the school but will not be published without renewed consent. More information regarding the storage and protection of images can be found in the school data protection policy.

A full copy of the school’s Protocol on online safety containing information on the safe use of photographs, videos, and the work of children in school can be found on the school website.

Name of parent / carer: .....

Signed: ..... Date: .....