



PUPIL ADMISSIONS PACK

Our Privacy Notice explains why we collect information. Please ask the office if you require a copy or the notice can be found at: www.alkboroughps.co.uk



Outstanding in 2012 and 2018
ALKBOROUGH PRIMARY SCHOOL

Headteacher : Miss J Ashton
Email: admin.alkborough@northlincs.gov.uk
Website: www.alkboroughps.co.uk

Dear Parent/Carer

Admissions Pack – Alkborough Primary School

Firstly, I would like to take this opportunity to welcome you and your child to our school and to wish them a happy and successful time with us.

Please find enclosed the schools data collection packs for new pupils starting our school.

I would ask that you read our school policies on our website and complete the following documentation:

- Data Collection Sheet
- Photographic Consent
- Permissions
- Individual Health Care Plan
- Home/School Agreement
- School's E-Safety Rules

Please sign and return the required sheets as indicated.

Information about our school uniform can be found on the school website.

If you have any queries or questions please do not hesitate to contact me.

Yours faithfully

Miss J Ashton
Headteacher



**Outstanding in 2012 and 2018
ALKBOROUGH PRIMARY SCHOOL**

Tel: 01724 720301

Headteacher : Miss J Ashton

The purpose of this form is to obtain consent from parents/carers and/or the student to use photographs and other 'media' to promote the school and to celebrate publicly, the successes and achievements of students, both during and after their education at the School.

I hereby consent to the use of photographs/videos/interviews taken of *me/my child/ren by the School for the purposes of internal displays, advertising or publicising events, activities, facilities, programmes of the School in newspapers, newsletters, website, other publications, television, radio and other communications and advertising media.

Please tick one of the choices below:

☐ Yes, I allow *my/my child/ren's photograph to be used for publicity by and for the School

☐ No, I do not want *my/my child/ren's photograph to be used for publicity by and for the School

External Media:

There may be occasions where a newspaper or magazine article is written about an event, the success of a sports team or winners of a competition, in these cases the newspaper or magazine will want to publish photographs with names attached.

I hereby consent to the use of photographs taken of my child/ren by Newspapers or magazines to celebrate victories or recognise events to be published with the name of my child associated with the picture.

Please tick one of the choices below:

☐ Yes, I allow *my child/ren to have their name associated with their photograph in newspaper or magazine articles

☐ No, I do not want *my child/ren to have their name associated with their photograph in newspaper or magazine articles

☐ No, I do not want *my/my child/ren's photograph to be used on the School social media sites

● I agree to photographs and videos being taken by school to be used in school only:

- Photographs ☐
- Videos ☐

● I agree that my child's work may be displayed on:

- On the school website ☐
- On class DoJo ☐
- On school display boards ☐

● I agree that appropriate photographs that include my child may be published:

- On the school website ☐
- In the newspaper ☐
- On class DoJo ☐

● I agree that appropriate videos that include my child may be published on the school website

☐

● I agree to photographs and videos, that may include my child, being taken by other parents / family members, on occasions such as Christmas Productions, concerts, assemblies or sport's day:

- Photographs ☐
- Videos ☐

Printed Name(s) of Child/ren:

Signature of Parent or Carer:

Alkborough Primary School E-Safety Rules

All pupils use computer facilities including Internet access as an essential part of learning, as required by the National Curriculum. Both pupils and their parents/carers are asked to sign to show that the e-Safety Rules have been understood and agreed.

Pupil:

Class:

Pupil's Agreement

- I have read and I understand the school e-Safety Rules.
- I will use the computer, Internet access and other new technologies in a responsible way at all times. .

Signed:

Date:

Parent's Consent for Internet Access

I have read and understood the school e-safety rules and give permission for my son / daughter to access the Internet. I understand that the school will take all reasonable precautions to ensure that pupils cannot access inappropriate materials, but I appreciate that this is a difficult task.

I understand that the school cannot be held responsible for the content of materials accessed through the Internet. I agree that the school is not liable for any damages arising from use of the Internet facilities.

Signed:

Date:

Please print name:

Data Collection Sheet

Alkborough Primary School

PUPIL DETAILS:

| | |
|------------------|---|
| Surname: | Forename: |
| Middle Name (s): | Chosen Name: |
| Legal Surname: | Gender: (please tick) Female <input type="checkbox"/> Male <input type="checkbox"/> |
| Date of Birth: | |

Address:

PARENT/CARER DETAILS:

| Forename: | Surname: | Relationship to Child: | Address: (If different from above) |
|-----------|----------|------------------------|------------------------------------|
| | | | |
| | | | |
| | | | |

EMERGENCY CONTACT DETAILS: *Place them in the order you wish them to be contacted in the event of an emergency. Please ensure that you contact School if any contact details change. By completing these details you are confirming that you have sought permission from the person listed to share their personal information.*

| Name | Contact Details (Telephone) | Relationship to Child |
|-----------------|-----------------------------|-----------------------|
| First Contact: | Home: Mobile: Work | |
| Second Contact: | Home: Mobile: Work: | |
| Third Contact: | Home: Mobile: Work: | |

DIETARY NEEDS:

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(please tick if relevant)

Vegetarian

☐

No Dairy Produce

☐

Nut Allergy

☐

Seafood Allergy

☐

Halal

☐

Other:

MEDICAL INFORMATION:

Allergies:

(Please list all allergies)

Asthmatic:

(Please provide school with an inhaler)

Yes

☐

No

☐

Other:

GP's Name:

Surgery Address & Telephone Number:

TRAVEL ARRANGEMENTS: *(Please tick relevant boxes)*

Bicycle

☐

Taxi

☐

Service Bus

☐

Walk

☐

Train

☐

Car

☐

School Bus

☐

MEAL ARRANGEMENTS: *(Please tick)*

School Meal

☐

Packed Lunch

☐

Free School Meal

☐

Home

☐

KS1 Free School Meal

☐

Ethnicity/Cultural:

Please tick one box

White

- British

WBRI

- Irish

WIRI

- Traveller of Irish Heritage

WIRT

| | | | |
|-------------------------------|-------------------------------|------|--|
| | - Gypsy/Roma | WROM | |
| | - White other | WOTH | |
| | | | |
| Mixed | - White and Black Carribbean | MWBC | |
| | - White and Black African | MWBA | |
| | - White and Asian | MWAS | |
| | - Any other mixed background | MOTH | |
| | | | |
| Asian or Asian British | - Indian | AIND | |
| | - Pakistani | APKN | |
| | - Bangladeshi | ABAN | |
| | - Any other black background | AOTH | |
| | | | |
| Black or British | - Caribbean | BCRB | |
| | - African | BAFR | |
| | - Any other black background | BOTH | |
| | | | |
| | - Chinese | CHNE | |
| | - Any other ethnic background | OOTH | |
| | - Prefer not to say | REFU | |
| | | | |
| Religion | | | |
| Baptist | | BPT | |
| Church of England | | CE | |
| Other Christian | | CHR | |
| Greek Orthodox | | GRE | |
| Hindu | | HIN | |
| Jehovah's Witness | | JEV | |
| Jewish | | JEW | |
| Methodist | | MTH | |
| Muslim | | MUS | |
| Roman Catholic | | RC | |
| Sikh | | SIK | |
| Other | | OTH | |
| No religion | | NON | |
| Prefer not to say | | REF | |
| | | | |



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Tel: 01724 720301
Headteacher : Miss J Ashton
Email: admin.alkborough@northlincs.gov.uk
Website: www.alkboroughps.co.uk

Dear Parent/Carers,

I would like to up-date the information we hold in school regarding permission from parents for various activities throughout the school year. To avoid sending out a slip before each event we would like to obtain 'bulk' permissions for a group of items.

Regarding sporting activities at Winterton Academy we will notify parents one week beforehand so pupils know to bring their PE kits on that particular day.

I would be grateful if you would complete the attached slip and return it to school as soon as possible.

MISS J Ashton
Head Teacher

Name of pupil _____ Class _____
I give permission as follows:

| | Give | Do not give |
|---|--------------------------|--------------------------|
| Short trips out of school into the local community i.e. maze/church/park/village | <input type="checkbox"/> | <input type="checkbox"/> |
| Make-up/Face Paints for Christmas Production/Various Activities | <input type="checkbox"/> | <input type="checkbox"/> |
| Sporting Activities at Winterton Academy | <input type="checkbox"/> | <input type="checkbox"/> |

Signed _____ Date _____

ALKBOROUGH PRIMARY SCHOOL

INDIVIDUAL HEALTHCARE PLAN

NAME

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

DATE OF BIRTH

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

NHS NUMBER

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

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CONDITION/S

| |
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| |
| |
| |

Describe condition and give details of pupil's individual symptoms:

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

Describe what constitutes an emergency for the pupil, and the action to take if this occurs

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

Daily care requirements: (e.g. before sport/at lunchtime)

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

ALLERGIES

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| |
|--|

CLASS/FORM

DATE:

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

NAME OF SCHOOL:

REVIEW DATE:

| | |
|---------------------------|--|
| Alkborough Primary School | |
|---------------------------|--|

CONTACT INFORMATION

Family Contact 1, Name, Phone Numbers, Relationship

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

Family Contact 2, Name, Phone Numbers, Relationship

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

Family 3

IC/Hospital Contact, Name, Phone Number

| |
|--|
| |
| |

General Practitioner, Name, Phone Number

| |
|--|
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Follow-up care

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

FOR OFFICE USE ONLY:

Who is responsible in an emergency: (state if different on / off-site activities)

| | |
|------------------------------|--|
| Headteacher | |
| Class teacher | |
| Consultant Paediatrician etc | |

Form copied to

Whilst every effort will be taken to ensure this individual healthcare plan is up to date, it remains the parents / carers responsibility to inform school of any changes.

| Signed | Signed | Signed |
|---------------------|--------|-------------|
| Health Professional | Parent | Headteacher |

Alkborough Primary School—Home /School Agreement

PARENTS



I agree to:

- see that my child attends school regularly and on time.
- send a note or telephone, on the first day of absence, if my child is unwell or has a medical appointment.
- see that my child gets to school with the right equipment on the right day, and encourage older children to take this responsibility themselves.
- let the school know about any problems that might affect my child's work or behaviour.
- work in partnership and support the school to maintain high standards of behaviour.
- support and encourage my child to complete set reading or any other homework tasks.
- attend termly open evenings to discuss my child's progress.

Signed:_____

Date:_____

PUPILS



I agree to:

- do my best and complete and bring any homework back on time.
- play safely and sensibly in the school grounds.
- display good manners in class, in the playground and at dinner time.
- follow the Bus Code if I take the school bus to and from school.
- respect, care for and help others at all times.
- look after the school's and other people's property.

Signed: _____

Date: _____

SCHOOL



The school agrees to:

- deliver a broad and balanced curriculum that is suited to the needs and abilities of each child.
- set termly targets in literacy and numeracy and inform parents of these targets.
- regularly mark pupil's class work and homework and provide feedback using the 'Tickled Pink and Green for Growth' marking scheme.
- encourage children to do their best at all times, take care of their surroundings, and of others around them.
- keep parents informed about school activities and which days PE and special equipment may be needed.
- keep parents informed about reading and any other homework which may be set to support classroom learning.
- contact parents if there is a problem with attendance.
- let parents know about any problems that may affect their child's work or behaviour.
- arrange open evenings to discuss child's progress.
- ensure that policies and similar public documents are available for parents to examine if requested.

Signed: _____

Date: _____