

Student Enrolment Form

For use from September 2017



Please complete this form fully and in BLACK INK, ensure writing is clear using CAPITAL LETTERS and return this form to Heyford Park Free School main office.

SECTION 1 STUDENT DETAILS

Legal Surname	_____	Year group	_____	Current age	_____
First Name	_____	Date of Birth	____/____/____		
Middle Name (s)	_____	Preferred Surname	_____		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Known Name	_____		
Home Address	_____	Home Telephone 1	_____		
	_____	Home Telephone 2	_____		
	_____	Mobile	_____		
Postcode	_____	Email Address	_____		

Name/address of previous school, nursery or pre-school:	Date Attended From:	Date Attended to:

Ethnicity, Language and Religion

This data is collected for educational purposes only as a means of ensuring fair and equal treatment for all.

Ethnic origin of child

First Language

Religion of child

Please tick

Please tick

Please tick

Chinese	<input type="checkbox"/>	Bengali	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>
Gypsy Roma	<input type="checkbox"/>	Cantonese	<input type="checkbox"/>	Christian	<input type="checkbox"/>
Irish Traveller	<input type="checkbox"/>	English	<input type="checkbox"/>	Hindu	<input type="checkbox"/>
Other Black African	<input type="checkbox"/>	Gudjurathi	<input type="checkbox"/>	Jewish	<input type="checkbox"/>
Other ethnic group	<input type="checkbox"/>	Hindi	<input type="checkbox"/>	Muslim	<input type="checkbox"/>
White/Asian	<input type="checkbox"/>	Other	<input type="checkbox"/>	Sikh	<input type="checkbox"/>
White/British	<input type="checkbox"/>	Punjabi	<input type="checkbox"/>	No religion	<input type="checkbox"/>
White/Irish	<input type="checkbox"/>	Polish	<input type="checkbox"/>	Other – please specify:	
White/African	<input type="checkbox"/>	Urdu	<input type="checkbox"/>		
White/Black Caribbean	<input type="checkbox"/>	Other - please specify:			
Other Asian background	<input type="checkbox"/>	Language spoken at home:			
Other Black background	<input type="checkbox"/>				
Other Mixed background	<input type="checkbox"/>				
Other White background	<input type="checkbox"/>	Country of Birth:			
I do not wish an ethnic origin to be recorded	<input type="checkbox"/>	Nationality:			

Does the child have a parent currently serving in the UK Military? Yes No Prefer not to say

Is your child entitled to Free School Meals? Yes No

What type of lunchtime meal will your child be having FSM School Dinner Packed lunch Home

Is your child entitled to free transport to and from school? Yes No

What is your child's usual mode of travel to and from school? _____
(e.g. Walk, Cycle, Car/Van, Car Share (with children from a different household), Public Bus, School Bus, Taxi, Train etc.)

SECTION 2 PARENT/CARER and EMERGENCY CONTACT DETAILS

Priority	Title	First Name	Surname	Gender	Relationship to child	Parental Responsibility?	Student Resident ?
1							
Address					Email Address		
Home Phone		Mobile		Work Phone		Main Phone	

Priority	Title	First Name	Surname	Gender	Relationship to child	Parental Responsibility?	Student Resident ?
2							
Address					Email Address		
Home Phone		Mobile		Work Phone		Main Phone	

Priority	Title	First Name	Surname	Gender	Relationship to child	Parental Responsibility?	Student Resident ?
3							
Address					Email Address		
Home Phone		Mobile		Work Phone		Main Phone	

Priority	Title	First Name	Surname	Gender	Relationship to child	Parental Responsibility?	Student Resident ?
4							
Address					Email Address		
Home Phone		Mobile		Work Phone		Main Phone	

I give permission for the following adults to collect my child from Heyford Park Free School. (Must be over 16 years of age). In case of emergency I will inform the class teacher directly or phone the office.

Name:	Relationship to child:

Password:

SECTION 3 MEDICAL INFORMATION

Doctor's Name _____
 Medical Practice _____
 Practice Address _____
 Postcode _____

Does your child suffer any medical condition(s) requiring treatment or medication that the school should be aware of, e.g. Asthma, Epilepsy, Allergies to bee stings, nuts or particular medicines etc. If YES please give details including any emergency action that should be taken:	<input type="checkbox"/> Yes <input type="checkbox"/> No
If your child has Asthma, it is a requirement of the school that they carry an inhaler with them at school everyday. This is particularly important for children travelling between sites. A secondary inhaler can be kept in the OM office. If your child has Asthma and is showing symptoms and their inhaler is not available or does not work, do you consent to your child receiving Salbutamol from an emergency inhaler held by the school for emergencies.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your child have any allergies, including allergies to medication? If YES please give details:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your child received an anti-tetanus injection in the last 5 years? Date of last anti-tetanus injection if known	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you consent to inform the school if your child has been in contact with/or travelled to a country that has any contagious or infectious disease, or suffered from anything that may be contagious or infectious prior to a visit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your child have any special dietary requirements? If YES please give details:	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 4 MEDICAL CONSENT

Are you happy for your child to administer their own medication?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you give permission for a member of staff to administer your child's pain relief?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Primary Students: Do you give permission for your child to receive Paracetamol Suspension (Calpol) for flu or pain relief? Please indicate dose.	<input type="checkbox"/> Yes <input type="checkbox"/> No 1 or 2 5ml syringe
Secondary Students: Do you give permission for your child to receive Paracetamol 500mg tablets for flu or pain relief? Please indicate dose.	<input type="checkbox"/> Yes <input type="checkbox"/> No 1 or 2 tablets
In an emergency and/or if I am not contactable, I am willing for my child to receive first aid treatment/doctor/hospital or dental treatment including an anaesthetic	<input type="checkbox"/> Yes <input type="checkbox"/> No

I give permission for information from this form to be used for all school visits, sports activities and off-site activities (both day and residential) for the year 2017-18 and understand this will continue until school leaving age unless I change it on the yearly student update form.

Signed by parent/carer: _____

Print name:	Date:
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SECTION 5 SPECIAL EDUCATIONAL NEEDS

Has a Statement of Special Educational Needs (SEN) been issued in respect of your child?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please give details of any EHC for SEN:	
Has your child ever had TAC, CAF, Child in Need, CP?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 6 FAMILY DETAILS

If your child has any siblings who attend this school, please provide their names.

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If parents are separated or divorced:

Please detail any court orders applying to the child (e.g. Ward of Court, Legal rights of access):

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Any court order should be brought into school and a copy held on school records.

Do you require copies of correspondence and reports to be sent to both sets of parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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SECTION 7 PARENTAL CONSENT FOR OFF-SITE ACTIVITIES

- I agree to my child taking part in school visits, sports activities and off site activities arranged by Heyford Park Free School.
- I agree to my child visiting places of worship.
- I agree to my child receiving urgent first aid or medical treatment if necessary when off-site.
- I agree to his/her participation in the activities which form part of the curriculum at Heyford Park Free School, including movement between sites and activities which use community facilities and the wider Heyford Park site.
- I understand that sports fixtures are part of the enrichment curriculum and that specific consent will not be requested for these, but that fixtures will be notified via the school website and team sheets with specific details will be on the school noticeboard.
- I understand that activities which take students away from Heyford Park for a day or residential visit will be outlined in the letter or email which I will receive for each visit. I understand that I may withdraw this consent at any time and that I will then be required to give consent for each visit on a single acknowledgement slip.
- I support the need for responsible behaviour on my child's part as set out in the Code of Conduct which I have read.
- I undertake to notify the school of any changes to contact details, including change of address, telephone numbers of emails.

Signed by parent/carer:	
Print name:	Date:

SECTION 8 PUBLICITY PERMISSION

Permissions regarding Publicity – School staff will take photos/videos of children for displays and to aid learning. These will not be showed publicly without the permissions below. Please tick if you give permission:

I give permission for images/videos of my child to be used in presentations and publications	
I give permission for my child’s name to be used in presentations and publications	
I give permission for my child’s name and image to be used together in presentations and publications.	
I give permissions for my child to participate in anonymous educational research to support the school	
Signature:	Date:
Print Name:	Title: Mr/Mrs/Miss/Ms

SECTION 9 Home — School Agreement

At Heyford Park Free School we aim to know every one of our students well, providing an environment that not only allows them to achieve what they are truly capable of, but also equips them with excellent academic qualifications and a ‘can do’ attitude.

To achieve this goal we will work together with students and parents to ensure all students engage fully with our curriculum, including the enrichment curriculum. We are confident that by strengthening the close links between students and staff, parents, governors, and members of the community we can produce well rounded, positive and caring young people who will go on to play responsible and valuable roles in society.

Students will

- Attend school, arrive on time and be prepared to work;
- Wear uniform properly and preferably with pride;
- Conform to the Code of Conduct, and Behaviour Policy;
- Work to a standard reflecting their ability;
- Participate in a range of activities outside the classroom

Parents will

- Ensure their children attend school, are punctual and prepared for work;
- Inform the School about reasons for absence;
- Provide school uniform and monitor appearance;
- Support the school in its application of the Code of conduct and Behaviour Policy;
- Encourage their children to do homework and check homework diaries regularly;
- Keep the school informed about any pastoral or academic concerns;
- Attend consultations with the staff

The School will

- Provide a well ordered and safe environment where learning can take place;
- Offer a balanced curriculum which will provide access to the next most appropriate stage of education or employment
- Set and, where appropriate, mark completed tasks;
- Provide appropriate feedback to students;
- Praise achievement and effort;
- Recognise and address individual needs;
- Expect the highest standards of work and behaviour;
- Keep parents informed regularly about progress and other matters of concern;
- Offer opportunities to participate in activities beyond the curriculum, including the chance to develop self- discipline and to take responsibility for others;
- Welcome parental feedback and involvement.

P Silver

Chair of Governors

K Healey

Principal

Signed by Student _____ Date _____

Signed by Parent/Guardian _____ Date _____

SECTION 10 HOME TO SCHOOL TRANSPORT BEHAVIOUR AGREEMENT– Secondary students only.
(Primary if applicable)

Parents and guardians are reminded that they are responsible for the behaviour of their children whilst travelling on school transport.

PARENTS/GUARDIANS WILL ENSURE:

- They support the school and the bus operator by ensuring that their son/daughter follows this Behaviour Agreement
- Their child is at the boarding point five minutes before transport is due and that young children are looked after until transport arrives
- Young pupils are met when the transport returns from school
- They make appropriate arrangements and ensure their child knows what to do if transport is late, or does not arrive
- Their son/daughter knows how to behave appropriately on school transport, i.e. behave sensibly and respectfully at all times and always remain seated with their seatbelt fastened unless otherwise instructed by the driver
- They report any incidents of concern as soon as possible to the school
- They co-operate with the school and the operator if their son/daughter exhibits bad behaviour on school transport
- If their child is found to be responsible for bad behaviour, they take reasonable steps to modify that behaviour, and to stress to their child the importance of having an appropriate attitude towards travelling on school transport
- If their child misbehaves on a bus they acknowledge their child may be issued with a warning or even be excluded from the vehicle or ultimately from the school – this should be taken very seriously. Exclusions are given because of dangerous and/or anti-social behaviour and/or behaviour which brings the school into disrepute. Where a child is excluded from travelling on private school transport, parents/guardians will continue to meet the cost of their child's place on the bus throughout the period of exclusion unless otherwise agreed directly between the parent/guardian and the bus company.
- They consider the effect of their child's behaviour on other children and take all relevant steps to improve it.

PUPILS WILL ENSURE:

- They act responsibly to ensure a safe and stress-free journey, and show respect at all times for drivers, fellow passengers and their own safety
- They adhere to any seating plan advised to them
- They follow the instructions of drivers at all times
- They report incidents or concerns about safety, in confidence, to a member of staff to enable the school to take appropriate action
- They take reasonable steps to keep the bus clean and tidy, which will include not wearing muddy sports shoes
- They consider taking the role of Bus Monitor, to ensure that all Home to School Transport related issues are monitored and reported in confidence. (This duty does not involve being responsible for other pupils' behaviour, or dealing with situations as they occur.)

TRANSPORT BANS/EXCLUSIONS FOR INCIDENTS OF UNACCEPTABLE BEHAVIOUR:

Please note this list is not exhaustive

- Not wearing safety belt
- Swearing at or abusing the driver and/or other passengers
- Being disrespectful to driver and/or other passengers
- Disobeying an instruction given by the driver
- Excessive/persistent littering
- Sticking chewing gum on the bus
- Playing of music (unless through personal headphones)
- Misuse of the bell
- Shouting
- Smoking
- Lack of consideration/ intimidation of other pupils or the general public
- Misuse of emergency exit/ misuse of main entrance
- Bullying (verbal and physical)
- Fighting
- Specifically distracting driver
- Running around the vehicle/switching from seat to seat
- Throwing objects inside/outside the vehicle
- Vandalism, graffiti, and criminal damage to vehicles
- Theft of personal property/possessions of driver or other passengers
- All illegal activities, eg. possession of knives, drugs, alcohol

P Silver
Chair of Governors

K Healey
Principal

Signed by Student: _____ **Signed by Parent/Guardian:** _____ **Date:** _____

SECTION 11 PUPIL PREMIUM

Pupil premium gives providers of education and childcare extra funding to support eligible students. The Educational provider can check to see if you are eligible using your national insurance number and date of birth. If you are happy for the provider to check this information, please include your details below:

National Insurance Number

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Date of Birth:

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SECTION 12 DECLARATION

Signatures and permissions (to be completed by a parent/carer with parental responsibility)

The information in this enrolment form is accurate to the best of my knowledge and I will inform the school of **any** changes as they occur.

Signature:

Date:

Print Name:

Title:

Mr/Mrs/Miss/Ms

When you have completed the form please return it to:

The School Office
Heyford Park Free School
74 Camp Road
Upper Heyford
Bicester
Oxfordshire
OX25 5HD

T: 01869 232203

E: parent@heyfordparkfreeschool.org

W: www.heyfordparkfreeschool.org

Heyford Park Free School is required by Data Protection legislation to respect information gathered in this form and to keep it securely. Individuals who are the subject of information gathered, or those with parental responsibility are encouraged to update information given and are entitled to see information held. Information in this form will be used for educational, welfare and managerial planning purposes.



HEYFORD PARK
FREE SCHOOL

BONUM COMMUNE COMMUNITATIS