

North Worcester Primary Academy

Admission of New Pre-School Pupils

Birth Certificate: Before your child starts school, we need to see their birth certificate. Would you please ensure you bring this into school before your child starts with us, where we can take a copy for their personal file.

Child's full legal name

Child's preferred forename

Child's preferred surname

D.O.B

Address

.....

.....

Postcode

Place of birth

Home phone number

Nationality

Please tell us who has parental responsibility for this child

If your child has a dual address and contact details please fill in details of contact 2

Priority contact 1

Name

Address

.....

.....

Postcode

Relationship to child

Address same as child Yes No

Permission to take child home Yes No

Home phone number

Mobile phone

Work phone number

E-mail

Priority contact 2

Name

Is this a dual address Yes No

Address

Postcode

Relationship to child

Permission to take child home Yes No

Home phone number

Mobile phone

Work phone number

E-mail

If possible please give other contacts for emergencies i.e. step parent, other family members, childminders, friends.

Priority contact 3

Name

Address

Postcode

Relationship to child

Permission to take child home Yes No

Home phone number

Mobile phone

Work phone number

Priority contact 4

Name

Address

Postcode

Relationship to child

Permission to take child home Yes No

Home phone number

Mobile phone

Work phone number

Please indicate whether your child be attending Pre-School term time only (38 weeks) or throughout the year (48 weeks) 38 weeks 48 weeks

Please indicate whether your child will be attending NWPAs Pre-School only or will be dual registered at another setting At NWPAs Pre-School only Dual Registered

Name of other setting.....

Please indicate your preferred sessions below:

	Morning Session 8.30am – 11.30am	Lunch Session 11.30am – 12.00pm	Afternoon Session 12.00pm – 3.00pm
Monday	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Tuesday	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Wednesday	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Thursday	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Friday	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>

Family doctor:

Please give name and practice name

.....

Tel no:

Medical & Allergies information: Does your child have any medical conditions? i.e. nut/ dairy/ food allergy/ hay-fever/physical impairments etc. Yes No

If yes, please give details

.....

.....

Is your child receiving treatment for this condition? Yes No

If yes, please give details.....

Has your child received all recommended pre-school immunisations? Yes No

Dietary Requirements: Does your child have any dietary requirements? i.e. dairy free/ vegan/ vegetarian etc.

Yes No

If yes, please give details

.....
.....

Inclusion: Has your child a Special Education Needs Statement, Educational Health Care Plan (EHCP) or any other special needs relating to their ability? Yes No

If yes, please give details

.....
.....

Religion: (please circle) Christian / Hindu / Muslim / Sikh / other religion / no religion

Ethnicity:.....

Language: Is English your child's first language? Yes No

If no, please advise what is your child's first language?.....

Travel: How will your child be travelling to school (please circle) car car-share walk bus other

Previous School/ Nursery: please provide details of previous school or nursery attended.

.....
.....

Sibling links: please provide details of any siblings in the school

.....

Permissions

First Aid: If your child suffers a minor accident injury at school he/she will be treated by an appropriate member of staff. Treatment carried out may include the use of any of the following: steri-wipes, plasters, dressings, anti-bacterial spray, bite spray, cold pack, antiseptic wipes etc.

I give permission for my child to receive the above treatment Yes No

If your child has any allergies to any of the above please give details:

.....

Is your child in nappies? Yes No

Do you give permission for our staff to change your child’s nappy/pants (if they have an accident) and apply nappy cream as and when required? **(Nappies/pull-ups, spare pants/change of clothes, wipes and creams are to be supplied by parents/carers).** Yes No

Off-Site Visits

I give permission for my child to take part in visits to the local vicinity for the duration of their stay at this school. By signing this slip you are simply giving permission for your child to make fully supervised short trips to places such as local shops to complete surveys. You will be notified of these trips happening but will not be required to consent each time. A separate permission slip together with full details of the visit will be provided for longer educational trips.

Yes No

Food Tasting

I give permission for my child to take part in any food tasting activities which may take place in their class.

Yes No

Please give details of an allergies/food preferences that your child may have:

.....

Guinea Pig / Small Animal Handling

I give permission for my child to handle and help care for the school guinea pigs/ small animals.

Yes No

Comments:

Seesaw

Within our setting we use the Seesaw app; this allows you to see many of the learning and activities and homework your child/children participates in at school. We require your consent to set up a parent account on Seesaw, allowing you to access your child’s account. We will be sharing your name, address and email with Seesaw. Under GDPR Seesaw will protect all details collected.

By checking the box below you are consenting to your data and your child’s data being shared with Tapestry/ Seesaw

Yes No

Pick-Up Passwords:

At NWPA, Keeping children in our care safe, is a fundamental. Please provide a pick-up password which will be used when your child will be collected by someone other than the parent/carer. We may not ask for this on a regular basis, but it will be requested where a member of staff is not familiar with the adult collecting a child. **Please be aware that should someone different to usual be collecting your child, you still need to inform the school office, the password system does not replace this requirement.**

Password:

Signed:

Dated:

Data Protection Act 2018: The school is registered under the Data Protection Act for holding data. The school has a duty to protect this information and to keep it up to date. The school has parent and pupil privacy notices which can be found on the school website www.northworcesterprimary.co.uk. The school is required to share some of the data with the Local Authority and with the DfE.