

# Burdett-Coutts & Townshend Foundation C of E Primary School

## Admissions Form



Nursery place	Reception place	In-year transfer Please circle year group: 1    2    3    4    5    6			
Required Information		Date of entry (office use):			
Child's full name:		Date of birth:			
Gender (please circle)      Boy                          Girl					
Full address:		Postcode:			
Home telephone:		Email address:			
Names of parents/carers with whom the child lives. If neither, please state the relationship.					
Name of 1 <sup>st</sup> main parent/carer:		Name of 2 <sup>nd</sup> main parent/carer:			
Do they have legal parental responsibility?		Do they have legal parental responsibility?			
Yes                          No		Yes                          No			
Home address:		Home address:			
Postcode:		Postcode:			
Daytime contact address (if different from above):		Daytime contact address (if different from above):			
Mobile telephone:		Mobile telephone:			
Work telephone:		Work telephone:			
Email address:		Email address:			
Sibling Details: Please note siblings must already be attending the school					
Name:	Boy/Girl	Date of birth:	Do the siblings live at the same address? Yes    No		
Name:	Boy/Girl	Date of birth:	Do the siblings live at the same address? Yes    No		
Name:	Boy/Girl	Date of birth:	Do the siblings live at the same address? Yes    No		
Name:	Boy/Girl	Date of birth:	Do the siblings live at the same address? Yes    No		

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Name of previous school or nursery (if applicable):			
Nursery Only: Does your child have a 30 hour code? Yes/No			
If Yes, please complete the information below.			
30 Hour Code:			
National Insurance Number (that 30 Hour Code is attached to):			
For office use only: (please tick and provide your initials when seen/complete)			
Parents ID seen?	Child's full birth certificate provided?	Utility bill provided?	Other? (please specify)
Admission Date:		Admission Number:	
UPN:		SEND Stage:	

Emergency Contacts: Please provide details for two named adults who have agreed to take responsibility for your child in an emergency situation or adults who will be permitted to collect your child from school	
Full name:	Full name:
Address:	Address:
Telephone:	Telephone:
Email address:	Email address:
Relationship to Child:	Relationship to Child:

Arrangements Before and After School			
Child brought to school by:			
<p>If your child makes their own way to school, please tick here:</p> <p>Note: We cannot allow any children to be collected by anyone under 16. Only Year 6 pupils will be given permission to walk home alone (excluding the period between the Autumn and Spring half terms). A written request must be submitted to the school titled 'Walking Home Alone Permission'. A document will then be returned to you outlining the expectations for this request being accepted. A copy of the form can be collected from the school office.</p>			
Please list the names of adults who have permission to collect your child:			
Adult 1:	Adult 2:	Adult 3:	Adult 4:

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Responsibility for Your Child				
I understand that the school is not responsible for my child before 8:55am (unless they attend Breakfast Club) or after 15:30pm (unless they attend Enrichment or After School Clubs).				
Signed:		Date:		
Wrap Around Care - Details & Costs: Breakfast Club: 07:45 - 08:45 (£2 per day) After School Club: 15:30 - 18:00 (5 days = £75 & 3 days = £45)				
Breakfast Club				
Do you require a Breakfast Club Place: Yes / No		If Yes, please indicate Full-time or Part-time		
If Part-time, please circle the days required:		Monday   Tuesday   Wednesday   Thursday   Friday		
After School Club				
5 days	Yes / No			
3 days (please circle the days required)	Monday   Tuesday   Wednesday   Thursday   Friday			
Travel Arrangements: (please circle the mode of transport that you use to get to school)				
Walk	Bus	Car/van	Train	Bicycle
Carshare	London overground	School bus	Taxi	Other (please specify)
School Meals				
My child will be having a school lunch.				
Please tick this box to indicate if you are eligible for free school meals.				
*Note: applications must be made through the learning trust website.				
My child will be having a packed lunch.				
Please list any dietary needs or food allergies here:				

Required Medical Information					
Does your child suffer from any of the following?					
Eczema	Yes	No	Asthma	Yes	No
Migraines	Yes	No	Epilepsy	Yes	No
Diabetes	Yes	No	Sight difficulties	Yes	No
Allergies	Yes	No	Hay fever	Yes	No



Does your child have any other conditions or disabilities that the school should be aware of?	
If you answered Yes to any of the above conditions, what would you consider the 'normal' treatment for this?	
Is there any further information that would be deemed relative to the condition?	
Does your child wear glasses in school?	Yes                      No
Please note: the school cannot take responsibility for administering medicines to children and medicine cannot be kept on the premises, unless a medical health plan has been issued by the school nurse/doctor.	
Doctor: Please provide the details of your child's doctor	
Name:	Address:     Postcode:
Telephone:	
Has your doctor put any restriction on physical activities (swimming, PE etc.)?	Yes                      No
If Yes, please provide details below and include a copy of the doctors note/certificate/letter	
Is your child allergic to plasters?	Yes                      No
Has your child been vaccinated against tetanus?	Yes                      No
If Yes, please provide details below:	
Information related to your child's learning	
Language usually spoken at home:	
If not English, please comment on your child's level of English (speaking):	
Does your child understand any language other than English?	
Does your child have any particular needs which may affect learning?	

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Any other comments you wish to make on your child's learning strengths and weaknesses:

Nationality:			Country of Birth:		
Ethnicity					
White			Black or Black British		
Albanian	WALG		Caribbean	BCRB	
English	WENG		Angolan	BANN	
Greek / Greek Cypriot	WGRE		Congolese	BCON	
Gypsy / Roma	WROM		Ghanaian	BGHA	
Irish	WIR		Nigerian	BNGN	
Scottish	WSCO		Sierra Leonian	BSLN	
Traveller or Irish heritage	WIRT		Somali	BSOM	
Turkish	WTUK		Sudanese	BSUD	
Turkish Cypriot	WTUC		Other Black African	BAOF	
Welsh	WWEL		Any other Black (pls state)	BOTH	
White Eastern European	WEEU		Chinese		
White Western European	WWEU		Chinese	CHNE	
White Other (please state)	WOTH		Any Other Ethnic Group		
Mixed			Afghan	OAFG	
White & Black Caribbean	MWBC		Kurdish	OKRD	
White & Black African	MWBA		Latin/South/Central American	OLAM	
White & Asian	MWAS		Vietnamese	OVIE	
Asian or Asian British			Any other group (please state)	OOEG	
Indian	AIND		If you do not wish the school to record an ethnic background for your child, please tick here.	REFU	
Pakistani	APKN				
Bangladeshi	PBAN				
Any other Asian (please state)	AOTH				
Religion: (please tick where applicable)					
Christian	Hindu	Jewish	Muslim		
Rastafarian	Sikh	Other religious belief (pls state):	No religion		
<p>Note: Any information provided will be used solely to compile statistics on the school careers and experiences of pupils from different ethnic backgrounds, to help ensure that all pupils have the opportunity to fulfil their potential. These statistics will not allow individual pupils to be identified. From time to time, the information will be passed on to the local education authority and the Department for Education and Skills (DfES) to contribute to local and national statistics. The information will also be passed on to the pupil's future school, to save it having to be asked again.</p>					



Parental Consent

School trips within the M25 area:

Throughout the year, pupils will participate in educational trips, related to the curriculum and extra-curricular activities within the M25 area of London. In all cases parents will be notified by letter, email or text message of up-and-coming trips including the date, nature and location along with further details that may include cost, clothing requirements and eating arrangements.

On receipt of this notification, parents will only need to inform the school if their child is not able to attend. In the majority of cases, it is an expectation that pupils attend all trips. Only pupils with the correctly signed permission forms on file will be allowed to go on school trips.

By signing and submitting this form you are giving consent to your child attending all trips within the M25 area:

Child's Name: \_\_\_\_\_

I give consent for my child to attend all school trips within the M25 area of London. If a trip is outside the M25, I understand that permission will be given separately.

Signed Parent/Carer: \_\_\_\_\_ Date: \_\_\_\_\_

Please initial the boxes below to give consent to:

Internet access to child friendly sites such as BBC

Copyright permission

Photographs e.g of school trips, music performances, class assemblies or pupils learning /playing in and out of the school-based setting - for the use of and by the school, the London Diocesan Board (LDBS), Westminster Local Authority, St Stephen's Church (our school church).

Note: You have the right to withdraw your permissions at any time. Please speak to a member of the office team if you would like to revoke your photograph permissions for your child. Please note we may also use these photos for up to three years after your child has left our school.

Data exchange

General Data Protection Regulations: the school is registered with the Information Commissioner's Office for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some data with the Local Authority and with the DCSF.