

WESTWOOD ACADEMY ADMISSION FORM



Please answer all of the following questions as fully as possible.

Full name of child Date of birth.....

Sex: Male/Female

Gender Identity: Male/boy/man

Female/girl/woman

Prefer to self-describe – Self-described gender identity.....

Address

..... Telephone.....

Name of Parents/Carers.....

Address of Parent 1 (if different from above) Parental Responsibility: Yes/No

.....

..... Telephone.....

Mobile..... Email address.....

Date of Birth..... National Insurance Number.....

Gender Identity: Male/boy/man

Female/girl/woman

Prefer to self-describe – Self-described gender identity.....

Address of Parent 2 (if different from above) Parental Responsibility: Yes/No

.....

..... Telephone.....

Mobile..... Email address.....

Date of Birth..... National Insurance Number.....

Gender Identity: Male/boy/man

Female/girl/woman

Prefer to self-describe – Self-described gender identity.....

You may be eligible for free school meals if you are receiving any of the following benefits, please tick the box below to indicate which benefit(s) you receive:

- Income Support
- Jobseekers Allowance (evidence must clearly state Income Based)
- Income Related Employment and Support Allowance
- Child Tax Credit, **not Working Tax Credit**, with an annual income not exceeding £16,190
- Pension Guarantee Credit
- Support under Part 6 of the Immigration and Asylum Act 1999
- Working Tax Credit 'run-on' – the payment someone may receive for a further 4 weeks after they stop qualifying for Working Tax Credit
- Universal Credit, with a household income of £7400 or less (after tax and not including any benefits you get)

PUPIL PREMIUM GRANT

If you are eligible for Free School Meals, and you apply, our school will also benefit. The government has introduced the Pupil Premium Grant to help children from lower income families reach their full potential and to achieve higher academic grades at school.

Under this funding arrangement, schools receive funds for every pupil registered for free school meals; so it is really important to us to make sure every child that qualifies is actually registered. Children who are adopted and children of military personnel are also eligible for this additional funding.

Position in Family – Please enter all children in the family with their date of birth, eldest first. Mark girls with a G and Boys with a B. Put a ring around this child.

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Name and address of previous school (or nursery)

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Name and address of Doctor.....

.....Telephone.....

Please give details of other responsible adults other than parents who may be contacted in the case of an emergency (at least two contacts)

Name	Relationship to pupil	Address	Daytime Telephone

Does your child have a disability or impairment that will need special provision?.....

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Details of any other relevant information about your child (medical conditions, general health, court orders etc)

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.....

.....

Does your child suffer with any peanut or other food allergy? (Please give full details)

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Details of any other agencies or professionals working with your child and their role.....

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Child's first language:.....

Other languages spoken in the child's home:.....

PHOTOGRAPHS/VIDEO.

Children will be photographed and videoed at school from time to time and by third parties authorised by the school for promotional activities e.g., newspapers and brochures, these photographs may be published in the media, on YouTube, on our Facebook/Instagram page and on our website.

Do you give consent for your child to be photographed or videoed or appear in the media, on YouTube, on our Facebook/Instagram page or our website?

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FIRST AID/MEDICAL ADVICE OR TREATMENT.

Do you give consent for basic First Aid to be administered to your child by members of school staff and for the school to seek emergency medical advice and/or treatment in the event the school is unable to contact a parent or carer?

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SCHOOL FUNDRAISING/MARKETING.

I understand that the school will circulate details of school fundraising events to all parents and carers, either by email, letter or text. This will include information on activities such as non-uniform days, Christmas events, school discos, summer events etc.

Do you give consent for your contact details to be used for this purpose?

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VISITS TO THE WESTWOOD AND LOCAL WALKS.

As part of their topic work classes may sometimes wish to visit the local area, for example the library, church or the Westwood on a number of occasions. Rather than send a letter home each time we are asking you to sign the permission slip below which will cover any planned local walks or visits during their time at Westwood.

**WESTWOOD ACADEMY
LOCAL WALKS AND VISITS TO THE WESTWOOD**

Name of child:

I give permission for my child to take part in any local walks and visit the Westwood during their time at Westwood Academy.

Signed:Parent (Print Name)

What is your family's religion? (Please tick appropriate box)

Buddhist	<input type="checkbox"/>	<input type="checkbox"/>	Muslim	<input type="checkbox"/>
Christian	<input type="checkbox"/>	<input type="checkbox"/>	Sikh	<input type="checkbox"/>
Hindu	<input type="checkbox"/>	<input type="checkbox"/>	No religion	<input type="checkbox"/>
Jewish	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>

To comply with government legislation, please complete this section if applicable.

Name and address of other natural parent (in case of divorce or separation).

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I confirm that the information given is correct.

I understand that the information provided on this form may be used for the detection and prevention of fraud.
I agree that you can use the information I have provided to process any claims for additional school funding and will contact other sources as allowed by law to verify any initial and ongoing entitlements.

I will inform you if I change my address.

General Data Protection Act 2018 Any personal data entered on this form may be held on computer files and may be passed to education authorities or establishments as appropriate.

Signed:

Date:

Please provide your child's ORIGINAL birth certificate for proof of age.

OFFICE USE ONLY:

Date of admission:.....
(Nursery/Reception)

Year Intake:.....

Class:.....

Birth certificate seen: