



WASHINGTONBOROUGH ACADEMY / PENFOLD NURSERY ADMISSION FORM 2023/2024

TERM OF ENTRY / YEAR
(for office use only)

CHILD DETAILS:

First name:

Middle name(s):

Surname:

Preferred name:

Date of birth:

Address:

Postcode:

Sex:

Gender identity:

Previous/current school attended:

Ethnicity:

Country of Birth:

Nationality:

Language spoken at home:

Religion:

My child has a parent in the UK Armed Forces: **YES []** **NO []**

My child is in receipt of Free School Meals: **YES []** **NO []**

My child is a registered Young Carer: **YES []** **NO []**

Does your child have any siblings at this school? If yes, please write their names below:

PENFOLD NURSERY APPLICANTS ONLY

If your child is enrolling at Penfold Nursery, you must provide proof of your child's date of birth (Birth Certificate or valid passport) to the School Office along with this application form.

PRIMARY GUARDIAN CONTACT DETAILS – First priority emergency contact:

First name:

Surname:

Title (Mr, Mrs, Miss, Ms, Dr. etc.):

Relationship to child: Father / Mother / Step Parent / Legal Guardian / Foster Carer/Parent / Other

(please delete as applicable) If other, please specify

*Date of birth:

Mobile number:

Home number:

Address:

Email address:

Work address/contact number (if applicable):

Does this Parent/Guardian have legal parental responsibility? **YES [] NO []**

PRIMARY GUARDIAN CONTACT DETAILS – Second priority emergency contact:

First name:

Surname:

Title (Mr, Mrs, Miss, Ms, Dr. etc.):

Relationship to child: Father / Mother / Step Parent / Legal Guardian / Foster Carer/Parent / Other

(please delete as applicable) If other, please specify

*Date of birth:

Mobile number:

Home number:

Address:

Email address:

Work address/contact number:

Does this Parent/Guardian have legal parental responsibility? **YES [] NO []**

*it is your choice to provide this information

Are natural parents separated? YES [] NO []

SEPARATED PARENT CONTACT DETAILS:

First name:

Surname:

Title (Mr, Mrs, Miss, Ms, Dr. etc.):

Relationship to child: Father / Mother / Step Parent / Legal Guardian / Foster Carer/Parent / Other

(please delete as applicable) If other, please specify

Mobile number:

Home number:

Address:

Email address:

Work address/contact number (if applicable):

Does this Parent/Guardian have legal parental responsibility? YES [] NO []

Is this parent an emergency contact? YES [] NO []

Is this parent authorised to collect? YES [] NO []

Please note that we will send information relating to your child's learning to both parents unless legal instruction specifies otherwise.

OTHER EMERGENCY CONTACTS: In case of illness and or emergencies, please provide other emergency contacts. Please continue on a separate sheet if necessary.

1. Full name:

Relationship to child:

Telephone number:

Do they live within close proximity to the school? YES [] NO []

Authorised to collect? YES [] NO []

2. Full name:

Relationship to child:

Telephone number:

Do they live within close proximity to the school? YES [] NO []

Authorised to collect? YES [] NO []

HELP US GET TO KNOW YOUR CHILD:

It is very important that we are aware of any issues so that we can provide your child with the highest level of support.

This information will be treated in the strictest of confidence.

Medical Issues: please include details of any medical conditions and the contact details of any medical agencies (if they are involved) with the dates of diagnosis/treatment etc. Please continue on a separate sheet of paper if required.

Disability: please include details of any disabilities and the contact details of any outside agencies (if they are involved) with the dates of diagnosis/treatment etc. Please continue on a separate sheet of paper if required.

Outside Agencies: please include any outside agencies that are working with your family and contact details with the dates of involvement. Please continue on a separate sheet if required. This could include, but is not limited to, agencies such as Portage, Speech and Language or an Early Help Adviser.

Allergies: please include details of any allergies and treatments. Please, continue on a separate sheet of paper if required.

Toileting: please include details of any areas that your child may need support in.

Food: please include any dietary restrictions/allergies that your child has.

Sensory Issues: please include any sensory issues that your child has.

Any other information: please include any other information that you feel would be beneficial.

FAMILY DOCTOR

Practice name:

Practice address:

Telephone number:

PERMISSIONS

TAPESTRY (Online Learning Journey)

We use a software package called Tapestry to create online learning journeys for your child's time in **Nursery and Reception**. We ask all parents to sign an agreement to show that you understand the terms of use and agree not to download or share any observations, photographs or videos on any social media platforms. If you do not want your child's image to be included in group observations, photographs or videos and shared on Tapestry please tick here

LOCAL VISITS

I give permission for my child to leave the school premises for educational purposes and activities in and around Lincoln, accompanied by school staff. All correct risk assessments will be in place.

Local Visits: YES [] NO []

Visit Places of Worship: YES [] NO []

FOOD TASTING

As part of our Food Education curriculum your child will taste foods. It is very important that you keep us up to date regarding food allergies.

My child is allergic to.....which must not be eaten.

My child is unable to eat.....for religious reasons.

FIRST AID

Should it be necessary, First Aid will be given to your child. It is extremely important that you keep us up-to-date with your current contact details.

Is your child allergic to plasters: YES [] NO []

INTERNET USE

Laptops and tablets are used throughout the school. This may involve the use of the internet; all safeguards are in place and the children are supervised. I acknowledge my child will use this equipment responsibly:

YES, I agree [] NO, I disagree []

PHOTOGRAPHIC CONSENT

As a school we regularly use photographs and film to show how our pupils and school develop. Images can also help us illustrate and communicate with parents about upcoming events and can help advertise and market the school to prospective parents. We are aware that parents and children enjoy being able to see their images and would like to give all pupils this opportunity. Therefore, we would like to seek consent to the use of your child's images during their time at Washingborough Academy. You can withdraw your consent at any time by writing to the School Business Manager. At that point, they will not be used in future publications, but we cannot prevent them from continuing to appear in publications already in circulation.

Please note, due to our MIS system, if you tick disagree to any of the options below, then all consents will be denied and a blanket NO to UK GDPR will apply to your child whilst at WA.

I consent to images or videos of my child being used on the schools;	Agree	Disagree
Website		
Social Media		
Newsletters		
School Prospectuses, Flyers, Leaflets & Brochures		
Other promotional material (such as banners, signs and displays)		
Advertising in newspapers and other media		
In and around the school building		
In promotional materials to show the history of the school		
Class photographs		

SOCIAL MEDIA

The term Social Media refers to platforms that schools typically use, which facilitate communication with parents and networking partners.

PENFOLD NURSERY APPLICANTS ONLY	Agree	Disagree
I give permission for Penfold Nursery staff to:		
<ul style="list-style-type: none">Apply sun screen provided by myself and clearly labelled with my child's name.		
<ul style="list-style-type: none">Change and clean my child in case of a toileting accident.		
<ul style="list-style-type: none">Use face paint on my child.		
I give permission for my child to visit any animals within the setting.		

I hereby give consent for the information above to be held on file in compliance with the Data Protection Act 2018.

Parent/Carer Name:

Parent/Carer Signature..... Date.....

HOME - SCHOOL AGREEMENT

We aim to provide our children with a calm, happy and purposeful environment in which they can flourish personally, socially and academically. We aim to ensure that our children will enjoy and profit from their time here and we will encourage them to meet the challenges of our complex society with confidence and understanding.

We believe that:

- Everyone in our school community is special and important.
- Our values based curriculum allows children and staff to work closely together to develop a strong educational philosophy, valuing the individual, community and environment.
- Each of us works to improve on our previous bests.
- Learning is active and meaningful.
- We will have high expectations of ourselves and each other.

AT SCHOOL - As staff we will do our best to:

- Care for each child's welfare, safety and happiness.
- Listen to parent's views and concerns.
- Provide a balanced values based curriculum and meet children's needs.
- Set high quality standards of behaviour and respect.
- Empower each child to be: Successful and confident; Self-aware and reflective; Independent and cooperative with others; A solution finder; Creative.
- Keep you informed.

Signed:



Dr J O'Rourke, Headteacher on behalf of Washingborough Academy

AT HOME - As parents we will do our best to:

- Support school in its aims, values for success and code of conduct for behaviour.
- Ensure children attend regularly; arrive at school on time dressed in school uniform.
- Provide a reason as soon as possible on the first day of absence.
- Read letters and information giving replies when necessary.
- Attend parents' evenings.
- Support children on special occasions in school.
- Contact school if we have concerns or problems at home which may affect children's work or behaviour.
- Support our child with reading and homework projects and other opportunities for learning at home.
- Provide a healthy snack for playtime and a healthy packed lunch.

Signed:.....

Name in capitals:.....

PUPILS - As a pupil I will do my best to:

- Show respect of others with my speech and actions.
- Try my best and improve on my previous bests.
- Take care of myself, of others and of my surroundings.
- Tell an adult if I am upset or unhappy.

- Follow the school rules.
- Play my part to make our school a good place to learn.

(Please sign on behalf of your child if applicable)

Signed:.....

THIS SECTION IS FOR PENFOLD NURSERY APPLICANTS ONLY

Early Years Funding commences the full term after a child's third birthday:

A child born in the period:	will become eligible for a place on or following:
1 st April to 31 st August	1 st September following the child's third birthday (start of autumn school term)
1 st September to 31 st December	1 st January following the child's third birthday (start of spring school term)
1 st January to 31 st March	1 st April following the child's third birthday (start of summer school term)

Please indicate below when you would like to enrol your child at Penfold Nursery:

January start (start of spring school term)	
Easter start (start of summer school term)	
September start (start of autumn school term)	

All 3 and 4 year olds are entitled to 15 hours universal funding per week. To check your eligibility for 30 hours funding please visit <https://www.childcarechoices.gov.uk>

To receive 30 hours funding you must apply for the 30 hour code and provide it to the school office before the start of term.

Please tick as appropriate:

We believe we will be allocated 15 hours of universal funding (up to 5 sessions per week)

We believe we will be allocated 30 hours of extended funding (up to 10 sessions per week)

Additional sessions can be purchased at £16 for half a day and £32 for a full day subject to availability.

Please indicate the sessions that you wish your child to attend:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning Session - 3 hours 08.40 to 11.40 am					
Afternoon Session - 3 hours 12.10 to 15.10 pm					

Please note, if your child attends a full day they will receive the 30 minute lunch session free of charge.

We will confirm your child's placement at Penfold Nursery in writing as soon as possible.

FOR OFFICE USE ONLY

Checks	Evidence / Comments	Signature / Date
Child name check:		
Date of birth check:		
Passport: (Country of issue)		
Non-EU – does this family have appropriate visa? End date:		
UPN:		
Date of admission:		
Date form received:		