



# Name CE Primary School

Forms to Return  
2024/25

Name of Pupil \_\_\_\_\_



## Dear Parents/Carers

This booklet contains important documents which aim to ensure that our school runs as effectively as possible. The admission forms are at the start of the booklet, where we collect important data about your child.

The Home-School Charter is designed to make expectations clear to all and it is a partnership document which we hope you will find useful.

The eSafety documentation is of equal importance and is designed to keep your child safe both in school and at home. Improved awareness of eSafety is crucial as children become increasingly engaged in the digital world.

We have social media pages along with an active school website. Therefore, we would be grateful if you could indicate your preferences on the use of photographs of your child. In most circumstances, children whose photos and work appear in this way will not be named.

There are several other forms also included within this booklet. Please can you complete and return the entire booklet to the school office as soon as possible. We will then hold all the details on your child's file. It is also a legal requirement that we see your child's birth certificate so we can check their date of birth. Please can you bring this to the office as soon as possible. We shall not need to retain the certificate or make a copy of it, and once checked you may take it away immediately.

Thank you for your support.

Yours sincerely

**Mrs Head**  
Headteacher





SCHOOL USE ONLY	
Year/Reg Group	
Admission Date	
Date Processed	
Birth Certificate Seen	
Other	

Child's Details			
Legal First Name:		Middle Name:	
Legal Surname:		Date of Birth:	
Gender:		Please bring your child's birth certificate into the school office as proof of date of birth.	
Home Address (including postcode):			
Country of Birth:		Ethnicity:	
Nationality:		First Language:	
Other Languages:			

Please give details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Prioritise them in the order that you wish for them to be contacted in an emergency.

Parent/Guardian Contact Information		Priority 1	
Title:		Legal First Name:	
Legal Surname:		Date of Birth:	
Currently serving in HM Military Forces:	YES / NO	National Insurance Number:	
Home Address (if different from above):			
Home Phone:		Mobile Phone:	
Email:			
Relationship to Child:		Parental Responsibility:	YES / NO
Usual Location During the Day:			



Parent/Guardian Contact Information		Priority 2	
Title:		Legal First Name:	
Legal Surname:		Date of Birth:	
Currently serving in HM Military Forces:	YES / NO	National Insurance Number:	
Home Address (if different from above):			
Home Phone:		Mobile Phone:	
Email:			
Relationship to Child:		Parental Responsibility:	YES / NO
Usual Location During the Day:			

Contact Information		Priority 3	
Title:		Legal First Name:	
Legal Surname:		Date of Birth:	
Home Address:			
Home Phone:		Mobile Phone:	
Email:			
Relationship to Child:		Parental Responsibility:	YES / NO
Usual Location During the Day:			

Contact Information		Priority 4	
Title:		Legal First Name:	
Legal Surname:		Date of Birth:	
Home Address:			
Home Phone:		Mobile Phone:	
Email:			
Relationship to Child:		Parental Responsibility:	YES / NO
Usual Location During the Day:			



Medical Information				
GP Surgery:		GP Phone:		
GP Address:				
Does your child suffer from any of the following:				
Asthma		Heart condition		Fits, fainting, blackouts or epilepsy
Diabetes		Severe headaches		Travel sickness
Allergies		Wears glasses		Hearing problems
Other	Please add further details below:			
Does your child require any long-term medication (e.g. Epipen, inhaler):				
<i>Please also complete the medication form included in this booklet.</i>				
Does your child have any educational needs (diagnosed or suspected), please detail below:				
Does your child receive and paramedical support (e.g. physical therapy, speech therapy):				



<b>Dietary Requirements</b>	
Does your child have any dietary requirements that the school should be aware of (e.g. Halal, allergies, vegetarian):	

<b>Consents</b>	
<b>Internet use: I consent to my child being able to watch appropriate film clips to support learning:</b>	
Signature:	
<p>At various times during the school year the children will be taken to participate in off-site visits to the local area. On these occasions, the children will walk with the appropriate level of adult supervision.</p> <p>Please note this permission applies to all local area visits held during your child's time at Red Hill Field Primary School.</p> <p><b>I give permission for my child to take part in off-site visits in the local area and to walk to and from school under the supervision of members of staff:</b></p>	
Signature:	
<p>We would like to take and use photos and video images of Trust school pupils participating in school activities for use in school and Trust media. This includes school displays, e-newsletters, communication platforms, school/Trust websites, social media, school/Trust promotional materials and (if appropriate) local or national media (whether printed, online or broadcast).</p> <p>We will not use any photograph or footage of your child/children without your consent. This consent will be applicable for the duration your child attends a Trust school and for a period of 2 years after they leave. There is no obligation for you to give consent and, if you choose not to give consent, we will ensure that your child's photo or video is not used for these purposes (to the extent your child is identifiable in any photograph or footage). If you do give consent but want to change your mind later, you can do so at any time by emailing the school office.</p> <p>Please note that, even if you give your consent below, we will ask for consent again prior to publishing any photos or footage of your child/children in third party media (not including school or Trust social media). This will allow you to make an informed decision based on specific circumstances.</p>	
<b>Yes I consent to photo and video images of my child/children being used for Trust and school media purposes.</b>	
<b>No I do not consent to photo and video images of my child / children being used for Trust and school media purposes.</b>	
Signature:	



<b>Previous School</b>	
Name and address of school:	
Dates attended (from and to):	
Reason for leaving:	
Does your child have any siblings at this school (if yes please give details):	

<b>Other</b>
Please use this space to give us any information about your child that you feel we should know, which has not already been covered by this form:

<b>Financial Support</b>	
<p>If you claim any of the following your child may be eligible for Free School Meals, Free School Milk and other financial assistance:</p> <ul style="list-style-type: none"> <li>• Income Support</li> <li>• Income-based Jobseekers Allowance</li> <li>• Income-related Employment and Support Allowance</li> <li>• Support under Part VI of the Immigration and Asylum Act 1999</li> <li>• The guaranteed element of State Pension Credit</li> <li>• Child Tax Credit (provided you're not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)</li> <li>• Working Tax Credit run-on - paid for 4 weeks after you stop qualifying for Working Tax Credit</li> <li>• Universal Credit - if you apply on or after 1 April 2018 your household income must be less than £7,400 a year (after tax and not including any benefits you get)</li> </ul>	
Please tick if you think you are eligible and would like support in making your application:	



<b>Data Protection Statement</b>			
<p>This data is being collected for the purpose of essential school information to comply with legal requirements and is in accordance with the Data Protection Act 1998 and the General Data Protection Regulations (GDPR) currently being enacted into UK law (May 2018). Disclosure of any of this information to statutory bodies will take place in accordance with our Privacy Notice and will be in accordance with the legislation or regulatory requirement. Explicit consent will be sought from Parents/Guardians if the school wishes to disclose this information to a third party for any other reason. Parents and Guardians have the right to access the personal data and can do so by using our Subject Access Request forms found on our website.</p> <p>By signing this document, you have given consent for the school to use this information supplied and have had permission from other persons listed on this form to use their information for the purposes of essential school information.</p>			
Name:			
Signature:		Date:	

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<b>Before and After School Club</b>			
<p>We are delighted to offer you our Before and After School Care Club. The prices for this can be found on our website and we accept employee and government childcare vouchers.</p> <p>Our aim is to ensure your child is well cared for in a happy, stimulating environment.</p> <p>If you wish to register your child, please complete your details below.</p>			
Child's Name:			
	Breakfast Session	After School Short Session	After School Long Session
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			



## Medicine Consent Form – Long Term Medicine

Child's name:	
My child has been diagnosed as having: (condition)	
He/she is considered fit for school but requires the following medicine to be given during school hours	
Name of medicine	
Dose required	
Time/s of dose	
Time of previous dose	
Quantity Received [where applicable]	
With effect from [start date]	
Until [end date]	
The medicine should be taken by (mouth, nose, in the ear, other: please provide details as appropriate)	
By signing this form, I confirm the following statements:	
<ul style="list-style-type: none"><li>• That my child has taken at least two doses of this medicine before and has not suffered any adverse reactions.</li><li>• That I will update the school with any change in medication routine use or dosage</li><li>• That I undertake to maintain an in-date supply of the medication</li><li>• That I understand the school will keep a record of the quantity of medicine given and records will be available upon request.</li><li>• That I understand staff will be acting in the best interests of my child whilst administering medication.</li></ul>	
Signed:	
Name:	
Date:	



# Alternative Menu Form

## (Allergy & Lifestyle Notification and Medical Diet Request)

The Company is committed to providing meals for children with medical requirements and any allergy or lifestyle needs.

For core allergy and lifestyle requirements, this form can be returned to the school directly to notify the catering department of your child's requirements. Core allergen free menus available to all schools are NGCI (gluten), NGCI & milk free, milk free, egg free and allergen free. Vegan and Halal menus are also available on request. Core allergies are managed in accordance with our [Allergy Policy](#). Parents may need a menu consultation with the catering team.

For medical diet requests, this form can be returned to the school who should forward it on to the operations manager. It is vital that all forms are accompanied with a referral letter or other information from a medical professional (GP/consultant/dietician). The Operations Manager & Unit manager may need to meet the student's parent/guardian to discuss any specific requirement and will consult with the company Nutritionist for bespoke dietary needs.

Students Details					
School/Academy			Male	Female	
Student's Name					
Student's Class					
<b>Diet requests are categorised into allergies, lifestyle and medical. Please complete the section/s which are applicable to the child's dietary needs.</b>					
Allergy Intolerance Notification					
Please confirm if allergy or intolerance	Peanut	Milk	Crustacean	Soybean	Fish
	Allergy	Intolerance			
Please indicate the foods the student <b>CAN NOT HAVE:</b>	Celery	Nuts	Sesame Seeds	Mustard	Lupin
	Eggs	Molluscs	Gluten	Sulphites	*Other
*Other – Please state (if the child has a dietary requirement outside of these 14, a bespoke menu may be required).					
Please provide details of the nature of the allergy/intolerance- ingestion/direct contact/in-direct contact					
Has the allergy or intolerance been medically diagnosed? (This must be provided for students with severe reaction / anaphylactic shock.)					
Do you require a menu consultation with the catering team?					

### Lifestyle Request

Please provide details for dietary requirements based on lifestyle choices:

- Halal
- Vegan
- Other (bespoke menu required, please provide details below)

### Medical Request

If the child requires a modified texture diet, please tick which texture/s **is** suitable:

- IDDSI 7: Easy to chew
- IDDSI 6: Soft & bite-sized
- IDDSI 5: Minced & moist
- IDDSI 4: Pureed / extremely thick
- IDDSI 3: Liquidised / moderately thick
- OTHER : Please complete below

Any additional details:

Please provide details of any other medical dietary needs. Please attach evidence from a health professional.

### Parent/Guardian Details

Main contact name and relationship	
Main contact – phone number and email address	
Second contact – name and relationship	
Second contact - phone number	

### Other Information (completed by the Caterer)

Has a photo been provided in order to complete the "REMEMBER ME" form?		If EpiPen/ medicine is needed, who is the contact in school and is it kept on site?	
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### Parent/Guardian Acceptance

Whilst we can provide meals which do not include allergens, please understand that these meals are prepared in a kitchen where other foods are stored, prepared & cooked that contain allergens as well as present in some ingredients from our suppliers due to production techniques.

I confirm that the information supplied is correct and will notify of any changes to the school and caterer immediately. I also understand that this information will be shared with others and maybe displayed in the kitchen.)

Name	Signed	Date
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Agreed Actions

The Company uses a colour coding system to identify student requirements. **Based on the above information, please confirm which applies:**

- **RED** – student has had a severe reaction/anaphylactic shock to known food or has a risk of choking.
- **AMBER** – student has an intolerance.
- **BLUE** – student excludes foods due to lifestyle choice.

**RED Category Student**

Plated Meal provided  
 Packed lunch provided by the parent/guardian.  
 Student going home.  
 Modified texture menu required  
 Other

**Type of Menu Agreed**

**AMBER & BLUE Student – Parent to order suitable meal from the menu following**

**Any other relevant information**

Operations/Area Manager	Signed	Date
Unit Manager Name	Signed	Date

# Learn-AT Home – School Agreement



## Parents/Carers

### I/we will try to:

- Support the school's positive ethos, values and high expectations of all children by encouraging my child to abide by the school rules
- Encourage my child to have a positive attitude to his/her education
- See that my child attends school regularly, on time, properly equipped and ready to learn
- Inform the school by 9:30am if my child is absent
- Let the school know about concerns or issues that might affect my child's work or behaviour
- Support my child with their homework and other opportunities for home learning
- Ensure my child is dressed in correct school uniform and PE kit with all belongings named
- Avoid taking my child out of school for holidays during term time
- Demonstrate respect to all staff, children and other parents in our school community
- Help the school to maintain a safe, healthy and secure environment for children. This includes respecting the school's no smoking policy; ensuring cars are parked sensibly and with regard for our neighbours; and avoiding bringing dogs onto the premises
- Ensure that my child arrives in time for the start of the school day and is collected on time at the end of the school day
- Inform the teacher / school office if the arrangements for collecting my child change
- Read and understand the school's behaviour policy and support any consequences my child may face for making the wrong choices, noting the following;
  - where the consequence is loss of break time/lunchtime, where possible this will happen on the same day
  - that my child cannot be excused from the consequences for their behaviour or any other intervention

### Social Media Code of Conduct for Parents

We value a positive partnership with all parents. All members of staff work hard to nurture constructive relationships with families and to engage parents in their children's education and the life of the school. Our mission is to serve children and families, to work with parents to raise the adults of the future together.

Learn-AT understands the benefits of using social media. However if misused, the whole school community can be negatively affected. A trust or school's reputation can be damaged and enormous distress can be caused to individuals.

Staff and governors' use of social media is governed by Learn-ATs e-safety policy and internet code of conduct. The Social Media Code of Conduct for Parents sets out clear guidance for how we expect parents to conduct themselves on social media and when using messenger apps, such as WhatsApp. This can be accessed on the Learn-AT website.

**We expect parents to behave in a respectful, civil and courteous way online and will not tolerate any abuse of the Social Media Code of Conduct for Parents.**

**I confirm I have read and understand this policy and agree to follow it and the statements above:**

<b>Signature:</b>	
<b>Name:</b>	
<b>Date:</b>	



# Learn-AT Home – School Agreement



## Child

### I will try to:

- Demonstrate the school values
- Remember that when I am wearing my uniform, I am an ambassador for the school
- Follow the school expectations for behaviour to keep myself and others safe
- Accept when I make a mistake and be willing to try to be better
- Demonstrate good manners when I speak to both children and adults
- Be caring towards other people and help them when they need it
- Complete all of my work in class and that which is set as homework
- Be honest
- Be a good citizen and care for our school and wider community

### eSafety and Acceptable Use Policy for Primary Pupils

#### To keep me safe whenever I use the internet or email, I promise...

- To protect my username and password and not to use the details of anyone else
- To keep all personal information private
- To block unknown links and attachments by not opening anything that I do not trust
- To be kind online and to tell someone if others are unkind to me
- To report any messages or internet pages that are unsuitable or upsetting
- To tell someone I trust if someone asks to meet me offline

#### When using computer equipment in school...

- I understand that my behaviour will be checked
- I will not play games unless I have permission
- I will not open, copy, delete or change anyone else's files, without their permission
- I will be polite and think carefully about how I talk to others online and what I say about them
- I will not take, copy or send pictures of anyone without their permission
- I will not try to upload, download or open any files, programmes or websites which are unsuitable or illegal
- I will not try to get around the filtering or security systems
- I will not install any programmes nor change the settings
- I will not use chat and social networking sites unless I have permission from an adult
- I will not copy other people's work and pretend it is my own
- I will not try to download pirate copies of music, videos, games or other software
- I will check that information I use from the internet is from a trusted website
- I will only use equipment provided by school and not my own mobile communication equipment.

#### If lessons are being delivered remotely...

- I will continue to follow the school rules

#### If I break these rules...

- I understand that the school's behaviour guidelines will be followed.

I have read and understand this policy and agree to follow it and the statements above:

Child Signature:

Child Name:

Date:

I have read and discussed this with my child and give permission for him/her to use the school's ICT systems, including the internet.

Parent/Carer Signature:

Parent/Carer Name:

Date:



# Learn-AT Home – School Agreement



School

**We will aspire to:**

- Provide a safe and caring environment in which pupils and staff demonstrate the school values towards the whole school community
- Provide a broad, balanced and engaging curriculum for all children and work to develop a positive attitude towards learning and themselves
- Have high expectations for our children and provide opportunities for every child to excel
- Give children the opportunity to take part in a wide range of enrichment activities including trips, visits and experiences
- Recognise each child for their individuality and celebrate their unique skills, talents and personalities
- Engage with our local community and encourage citizenship enabling children to be active, informed citizens who can contribute to society
- Reward good behaviour and consistent effort
- Deal promptly and sensitively with children when issues arise and ensure that parents are made aware of any concerns regarding work, behaviour, attendance or punctuality
- Make time available for children to discuss problems and worries and for parents to discuss any concerns they have about their child
- Work with appropriate outside agencies, parents/carers when applicable to ensure the best outcomes
- Set appropriate homework
- Inform parents of their child's progress by sending home an end of year report and arranging parent/teacher consultations
- Contact parents/carers if there is a problem with their child
- Ensure that assessment and feedback is regular, useful and moves learning forward
- Keep everyone informed about school activities through email, our website, social media, regular newsletters and notices
- Offer opportunities for parents and carers to get involved in school life
- Maintain two-way communication channels for parents and staff and endeavour to reply to non time-critical requests within 3-5 working days

**Signature:**

**Headteacher Name:**

**Date:**





# Name Primary School

## Blaby Stokes CE Primary School

**Executive Headteacher:** Mr Stephen Snelson

**Head of School:** Mrs Rachel O'Hara

Queens Road, Blaby, Leicester, LE8 4EG