



# **Admission Information**

**Student Name** 

# **Student Admission Form**

This form should be completed by the parent/carer of the student concerned. Please complete in **BLOCK CAPITALS**, and return to the school.

Legal Surname		Legal Forename		
Preferred Surname		Preferred Forename		
Address (including postcode)		Date of Birth		
			Male/Female	
Previous School				
1st Parent/Carer contact details				
Surname		Forer	name	Title
Address (including postcode)		Home Phon		
		Work	(	
		Phon	e	
		Mobi	le	
		Phon	e	
Relationship to Student		Email address		
2 <sup>nd</sup> Parent/Carer contact details	3			
Surname		Forename Title		Title
Address (including postcode)		Home		
		Phone		
		Work		
		Phone		
		Mobile		
		Phone Email address		
Relationship to Student		Email	Taddress	
Legal Parental	Details			
Responsibility				
Yes/No *				
If no, please give				
details				

# **Additional Emergency Contacts**

In the event of an emergency, if we are unable to contact a parent/carer by telephone, we may need to speak to an alternative emergency contact.

# 1<sup>st</sup> Additional Emergency Contact

Surname	Forename	Title	
Home Telephone			
Work			
Telephone			
Mobile			
Telephone			
Relationship to			
Student			

# 2<sup>nd</sup> **Additional** Emergency Contact

Surname	Forename	Т	ïtle
Home Telephone			
Work Telephone			
Mobile Telephone			
Relationship to Student			

Siblings at Vale of York Academy (currently enrolled or attended in the last 5 years)

Name	Date of Birth	
Name	Date of Birth	
Name	Date of Birth	

# **Dietary Requirements**

# Full Name of Student

Surname		Forename			Date of Birth	
Please give deta	ails of any dietary re	equirements				
Is this request f	or special dietary re	equirements the r	esult of:	(please tick)		
Medical Cond	lition	Allergy [		Personal Pref	erence	
Please give det	ails of any Allergy/	Intolerances (if a	pplicable	<b>=</b> )		
Diagnosed by (i	f applicable):					
Please attach a received	letter from the pra	actitioner detailin	g the co	ndition along v	with any diet/ir	formation sheet

<u>Medical</u>				
Family Doctor:		Telephone:		
Address:				
Does vour child ha	ve any of the follow	ving medical conditions: (ple	ase circle)	
Asthma:	Yes / No	An inhaler in school:		
Wears Glasses:	Yes / No	Hay Fever	: Yes / No	
Hearing difficulty:	Yes / No	Allergies:	Yes / No	
school should kno		ical conditions or disability n	ot listed that you thin	ik the
If your child has a	a Health Care Plan 1	for chronic illness please att	ach a copy to this for	m.

# **Cultural Information**

We are required by the Department for Education to obtain statistics for the school about the ethnicity of our students. This information is strictly confidential. We must stress that you are under no obligation to complete this part of the admissions form.

# **Home Language:**

Please circle one option only

Bengali	Chinese	English	French	Greek	Hindu	Italian
Punjabi	Polish	Portuguese	Spanish	Turkish	Urdu	Other (please state)

# First Language:

Please circle one option only

Bengali	Chinese	English	French	Greek	Hindu	Italian
Punjabi	Polish	Portuguese	Spanish	Turkish	Urdu	Other (please state)

# **Ethnic Origin:**

Please circle one option only

British	Irish	Traveller	Gypsy/Roma	White/European	Chinese
White/Black African	White/Asian	White/Black Carribbean	Any other mixed background		
Indian	Pakistani	Bangladeshi	Any other Asian background		
Caribbean	African	Any other black background			

# **Religion:**

Please circle one option only

Buddhist	Christian	Hindu	Jewish	Muslim
No Religion	Sikh	Other Religion	Prefer not to answer	

#### **Lunch Arrangements**

Please circle one option only (i.e the one used most frequently)

School Dinner - Paid	School Dinner - Free	Packed Lunch
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# **Travel Arrangements**

Please circle one option only (i.e the one used most frequently)

Bus	Car Share	Car/Van	Cycle
Taxi	Train	Walk	Other (please state)

#### The Equality Act Survey

As part of the Equality Act 2010, schools are required to keep records as to the nature of any disabilities regarding prospective students and their families. This is so we can ensure that the Vale of York Academy site is accessible to all and reasonable adjustments can be made.

Therefore, we are asking all parents if they could provide us with information regarding the nature of any disabilities in their <u>immediate</u> family which would help us to ensure that our site is accessible to all wherever possible.

Any information given will be treated with the strictest of confidence.

Student Name:	
Family Member Concerned:	
Nature of the Disability:	
Support Required from the Academy: _	

#### Images and videos parental consent form

This form explains the reasons why and how Vale of York Academy may use images and videos of your child. Please read the form thoroughly and outline your agreement as appropriate.

Name of parent/guardian:	
Name of pupil:	
Year:	

#### Why do we need your consent?

Vale of York Academy will periodically request the consent of parents/guardians to use images and videos of their child for a variety of different purposes. Without your consent, the school/academy will not use images and videos of your child. Similarly, if there are only certain conditions under which you would like images and videos of your child to be used, the school/academy will abide by the conditions you outline in this form.

#### Why do we use images and videos of your child?

Vale of York Academy uses images and videos of pupils, individually or as a group, as part of school/academy displays to celebrate school life and pupils' achievements; to promote the school/academy on social media and on the school's website; and for other publicity purposes in printed publications, such as newspapers.

#### What are the conditions of use?

- It is the responsibility of parents/guardians to inform the school/academy, in writing, if consent needs to be withdrawn or amended (\*).
- The school/academy will not include personal emails, postal addresses or telephone numbers on images or videos on our website, in our school/academy prospectuses or any other printed publications.
- The school/academy may use work created by pupils.
- The school/academy may use group or class images or videos with general labels, e.g. 'sports day', 'awards evening' etc.
- The school/academy will only use images and videos of pupils who are suitably dressed, i.e. it would not be suitable to display an image of a pupil in swimwear.
- The school/academy will take class images of your child which are available to purchase annually. This may include a class/form or year group photograph which could be displayed within the school/academy environment.

#### **Providing your consent**

Please read the following conditions thoroughly and provide your consent as appropriate by ticking either 'Yes' or 'No' for each criteria. The school/academy will **only** publish images and videos of your child for the conditions that you provide consent for.

This policy excludes any consent for remote learning provision. The guidance and consent forms for remote learning will be issued separately, if required.

**Identified** - Photographic image is published with a name and/or identifiable features. **Unidentified** - Photographic image is published without the name or any identifiable information.

I provide consent to:	Yes	No
In School/Academy use		
I agree to my child's <b>individual</b> photograph being used on notice boards and		
displays inside the school/academy.		
Identified		
Unidentified		
I agree to my child's photograph (as part of a <b>group</b> photograph) being used on notice boards and displays inside the school/academy.		
Identified	П	
Unidentified		
The school/academy may make recordings of my child (on video or web cam) for teaching and learning purposes, for use only inside school/academy and/or the		
Trust.		
Identified		
Unidentified		
Marketing Materials / Publications/School Photographs		
I agree to my child's photograph being used in marketing material, e.g. brochures/		
prospectus and/or marketing literature.		
Identified		
Unidentified		
I agree to the school/academy sharing the following data with the school's official		
external photography company for official school images. This will be applicable to		
individual and group photographs. This includes the following:		
Pupil's Name, Class and Roll number		
Parent/Carer's name and email address		
Press		
I agree to the local media using images of my child to publicise school/academy		
events and activities.		
Identified		
Unidentified		
I agree to the local media using videos of my child to publicise school/academy		
events and activities.		
Identified		
Unidentified		

Social Media		
I agree to my child's photograph and/or videos of my child being published on		
Social Media (NB: Social Media may include: School Newsletter, Twitter, Facebook, Instagram).		
Identified		
Unidentified		
Websites		
I agree to my child's photograph being published on the Hope Sentamu Learning		
Trust (HSLT) and/or school/academy website.		
Identified		
Unidentified		
	Yes	No
I agree to videos which include my child, taken during events at the school/academy		
to be used on the school/academy website and/or the HSLT website.		
Identified		П
Unidentified		
Pight to Withdraw		
Right to Withdraw	ı	ı
I understand that consent for this is voluntary and I may withdraw my consent at		
any time *.	1	ı
I understand no additional personal details (such as phone number and address) will be published.		

# Refreshing your consent

This form will be updated periodically. Consent will also be refreshed where any changes to circumstances occur - this can include, but is not limited to, the following:

- Changes to a pupil's circumstances, e.g. safeguarding requirements mean a pupil's image cannot be used
- Changes to parent/guardian consent, e.g. amending the provisions for which consent has been provided for

Where you would like to amend the provisions for which consent has been provided, you must submit your request in writing to the school/academy, either by post or via <a href="mailto:hello@voy.hslt.academy">hello@voy.hslt.academy</a> A new form will be supplied to you to amend your consent accordingly and provide a signature.

#### \*Withdrawing your consent

Parents/guardians have the right to withdraw their consent at any time. Withdrawing your consent will not affect the legality of processing images or videos that were shared prior to withdrawal; however, the school/academy will make every effort to remove images of the pupil where possible, e.g. images of the

pupil on the school's website will be removed. If you would like to withdraw your consent, you must submit your request in writing to the school/academy, either by post or via <a href="mailto:hello@voy.hslt.academy">hello@voy.hslt.academy</a>

#### **Declaration**

I hereby understand that I have provided my consent above as appropriate, and the school/academy will only use images and videos of my child in line with my requirements. I can amend or withdraw my consent at any time and must do so in writing to the school/academy, either by post or via hello@voy.hslt.academy

I have read and understood the contents of this form:		
Name of Parent/Guardian (IN CAPITALS):		
Signature of Parent/Guardian:		
Date:		
Date:		

If you have any questions regarding this form, please do not hesitate to contact the school's <u>Data</u> <u>Protection Representative</u>. For more general queries please contact the HSLT's Data Protection Officer via <u>dpo@hslt.academy</u> or call 01904 560053.

#### Parental Notification and Consent Form for the use of Biometric Data

#### Notification of intention to process pupils' biometric information and consent form

Vale of York Academy wishes to use information about your child as part of an automated (i.e. electronically-operated) recognition system. The purpose of this system is to facilitate catering transactions to be made using pupils' fingerprints instead of by using cash.

The information from your child that we wish to use is referred to as 'biometric information'.

#### Biometric information and how it will be used

Biometric information is information about a person's physical or behavioural characteristics that can be used to identify them, e.g. their fingerprint. The academy would like to collect and use the following biometric information from your child:

#### Fingerprint

The academy would like to use this information so that your child can pay for their school meal using their fingerprint.

The information will be used as part of an automated biometric recognition system. This system will take measurements of the biometric information specified above and convert these measurements into a template to be stored on the system. An image of your child's biometric information is not stored. The template (i.e. the measurements taken from your child) will be used to permit your child to access services. The law places specific requirements on schools when using personal information, such as biometric information, about pupils for the purposes of an automated biometric recognition system. For example:

- The academy will not use the information for any purpose other than those for which it was originally obtained and made known to the parent(s) (i.e. as stated above).
- The academy will ensure that the information is stored securely.
- The academy will tell you what it intends to do with the information.
- Unless the law allows it, the academy will not disclose personal information to another person or body.

Please note, the academy has to share the information with the following bodies:

Civica

This is necessary in order that your child can pay for their school meal using their fingerprint.

#### Providing your consent/objecting to the use of biometric data

Under the Protection of Freedoms Act 2012, we are required to notify each parent of a child and obtain the written consent of at least one parent before being able to use a child's biometric information for an automated system.

Consent given by one parent will be overridden if the other parent objects in writing to the use of their child's biometric information. Similarly, if your child objects to the use of their biometric information, the academy cannot collect or use the information for inclusion on the automated recognition system.

You can also object to the proposed processing of your child's biometric information at any time or withdraw any consent you have previously given. Please note that you must make any consent, withdrawal of consent or objection in writing.

Even if you have given your consent, your child can object or refuse at any time to their biometric information being collected and used - their objection does not need to be in writing. We would appreciate if you could discuss this with your child and explain to them that they can object if they want to.

The academy is happy to answer any questions you or your child may have — please contact <a href="mailto:hello@voy.hslt.academy">hello@voy.hslt.academy</a> with any questions.

If you do not wish for your child's biometric information to be used by the academy, or your child objects to such processing, the academy will provide reasonable alternative arrangements for pupils who are not going to use the biometric system.

Please note that, when your child leaves the academy or ceases to use the biometric system, their biometric information will be securely erased in line with the Trust's Data Protection (GDPR) Policy (including the Data Retention Schedule).

Please complete the form below to confirm if you do or do not consent to the collection and use of your child's biometric information and return it to the **school office**.

#### Consent form for the use of biometric information

Please complete this form to confirm whether you provide consent for the academy to collect and use the following biometric information relating to your child:

Fingerprint

This biometric information will be used by the academy for the following purpose:

Catering

Having read the guidance provided to me by Vale of York Academy, I (please tick your selection):

- Do consent to the processing of my child's biometric data x
- Do not consent to the processing of my child's biometric data \*

#### For parents that have provided consent

Please confirm that you have read and understood the following terms:

- I authorise the academy to use my child's biometric information for the purpose specified above until either they leave the academy or cease to use the system.
- I understand that I can withdraw my consent at any time.
- I understand that, if I wish to withdraw my consent, I must do so in writing and submit this to PA to The Principal, Vale of York Academy, Rawcliffe Drive, York YO30 6ZS.
- I understand that once my child ceases to use the biometric system, the school/academy will securely delete my child's biometric information.

I confirm that I have read and understood the terms above \*

For a	all pa	rents
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Name of child:	
Name of parent:	
Signature:	
Date:	

# **Student Reports**

It is normal practice to send a copy of the student reports to those parent(s) with whom the child resides. If you wish a report to be sent to an additional person, please give the details below.

Surname	Forename	Title
Address (including postcode)		
Relationship to Student		

#### Home - School Agreement

#### The Vale of York Academy Commitment

- Promoting high standards of work and behaviour
- Promoting equal opportunities for all
- Working in partnership with the local community

#### THE ACADEMY

#### The academy will:

- Provide a secure, caring and calm environment in which students can learn, grow and develop
- Contact parents if there are concerns or problems with their child's attendance, punctuality, work, behaviour or health
- Provide parents with regular information about student progress and general academy matters
- Provide a curriculum which is broad, balanced and appropriate

#### THE STUDENT

#### I will:

- Attend the academy punctually, properly equipped and in full uniform
- Follow academy rules and behave according to the Positive Discipline policy
- Strive for success in all my academy activities including homework
- Pass on all correspondence from the academy to my parents

#### **THE PARENTS**

#### I/We will:

- Support the school by encouraging an aspirational attitude to learning and achievement
- Ensure my child attends regularly and punctually with correct uniform and equipment
- Support the academy in maintaining high standards of behaviour through the Positive Discipline Policy including after school detentions
- Give my child support and encouragement with homework and weekly checks of the student planner
- Attend Parents' Evenings to discuss my child's progress
- Inform school of illness or other issues, which may affect my child's performance
- Let school know about any concerns I have about my child's education
- Not take holidays during term time
- Support out of hours learning sessions
- Provide the correct uniform and equipment for my child, and support the sanctions relating to uniform, kit and equipment

Academy Representative:	Signed:	Date:	
Student Name:	Signed:	Date:	
Parent/Carer Name:	Signed:	Date:	

#### **ICT Acceptable Use Policy**

Parent / Carers Name:

New technologies have become integral to the lives of children and young people in today's society, both within the academy and in their lives outside the academy. The internet and other digital information and communications technologies are powerful tools, which open up new opportunities for everyone. These technologies can stimulate discussion, promote creativity and stimulate awareness of context to promote effective learning. Young people should have an entitlement to safe internet access at all times.

#### This Acceptable Use Policy is intended to ensure:

- that young people will be responsible users and stay safe while using the internet and other communications technologies for educational, personal and recreational use.
- that academy ICT systems and users are protected from accidental or deliberate misuse that could put the security of the systems and users at risk.
- that parents and carers are aware of the importance of e-safety and are involved in the education and guidance of young people with regard to their on-line behaviour.

No child will use their mobile phone whilst in the academy for any purpose unless directed to do so by a member of staff.

The academy will try to ensure that students will have good access to ICT to enhance their learning and will, in return, expect the students to agree to be responsible users. A copy of the Acceptable Use Policy is attached to this permission form, so that parents / carers will be aware of the academy expectations of the young people in their care.

Parents are requested to sign the permission form below to show their support of the academy in this important aspect of our work.

Student Name:		
As the parent / carer, I give permis academy.	sion for my child to have access t	to the internet and to ICT systems at
education to help them understand I understand that my child is not po- academy, unless directed to do so I understand that the academy will systems, to ensure that young peo	d the importance of safe use of IC ermitted to use their mobile photoby staff. I take every reasonable precaution ple will be safe when they use the not ultimately be held responsible mobile technologies. I y on the ICT systems will be monulabout any possible breaches of the safe use of the internet and digital	ne for any purpose within the on, including monitoring and filtering e internet and ICT systems. I also e for the nature and content of materials itored and that the academy will e Acceptable Use Policy.
Parent/Carer Name:	Signed:	Date:

#### **Tutor Group Organisation**

At Vale of York Academy we have a strong sense of community, and our tutor groups are at the heart of our pastoral care. We structure these groups in year 7 in a way that both fosters new friendships and social circles, but also promotes a safe and reassuring environment where existing friendships from primary school can continue.

In an attempt to ensure that all of our new year 7 students have at least one friend in the same tutor group, we ask parents to complete the friendship form below. We hope to guarantee that all new students will have at least one identified friend within their tutor group. The Transition Lead for Vale of York Academy is Mrs Laura Duncalf, who can be contacted via email - l.duncalf@voy.hslt.academy.

Student Name:	
Primary School:	
Identified Friends (please list up to five in order of preference):	
1)	
2)	
3)	
4)	
5)	
My child is the only student joining Vale of York Academy from their current primar	ry school
Yes/No	
If there are any issues (friendship, bullying, relatives etc.) you would like to share wabout your child and other students joining us in September, which may influence of group organisation, please use the space below to do so.	
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