



Ysgol Penglais School Admission form

The National Assembly of Wales and Ceredigion County Council require us to collect data on students entering Penglais School. The data collected on this form by Penglais School will be used in strict confidence and treated according to the principles and requirements of the Data Protection Act 1998. The data will only be used by the School for education and school purposes and will only be disclosed to persons, bodies or agencies legally entitled to disclosure as recorded in the Ceredigion County Council Data Protection Notification. The data collected will not, under any circumstances, be distributed or sold to third parties.

This form MUST be completed by a person with parental/guardian responsibility for the named student. If you agree to all sections of this form it will require FOUR separate signatures. If, for any reason, you are not prepared to consent and sign any section of this form you must contact the Headteacher in writing.

If you require any assistance in completing this form please do not hesitate to contact us on.

Telephone 01970 624811 or e-mail admin@penglais.org.uk

When you have completed and signed this form please return as soon as possible to Reception at Penglais School, Waunfawr, Aberystwyth, SY23 3AW.

STUDENT INFORMATION

SURNAME	
FIRST NAME	
OTHER NAME(S)	
PREFERRED NAME	This is the name by which the student wishes to be known. It may be first name or one of the other names.

GENDER	M / F
--------	-------

DATE OF BIRTH	/	/	
---------------	---	---	--

ADDRESS (line 1)									
ADDRESS (line 2)									
TOWN									
COUNTY									
POSTCODE	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>								

HOME TELEPHONE NUMBER (including code)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; height: 20px; text-align: center;">0</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>	0																
0																		

FAMILY INFORMATION

If the new student has any brothers/sisters including half-brothers/sisters in Penglais. Please list eldest first.

Surname	First name	Gender	Date of Birth
			/ /
			/ /
			/ /

PARENT / GUARDIAN INFORMATION

Parental and Emergency Contact – please put in priority order

CONTACT 1 - please enter the name of parent / guardian.

Please tick this box if this person has parental responsibility.

TITLE																		
SURNAME																		
FIRST NAME																		
RELATIONSHIP																		
Home telephone number	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; height: 20px; text-align: center;">0</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>	0																
0																		
Work telephone number	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; height: 20px; text-align: center;">0</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>	0																
0																		
Mobile telephone number	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; height: 20px; text-align: center;">0</td> <td style="width: 10%; text-align: center;">7</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>	0	7															
0	7																	
E-MAIL ADDRESS																		

If the address is different from the student's please complete this section

ADDRESS (line 1)
 ADDRESS (line 2)
 TOWN
 COUNTY
 POSTCODE

CONTACT 2 - please enter the name of parent / guardian.

Please tick this box if this person has parental responsibility.

TITLE
 SURNAME
 FIRST NAME
 RELATIONSHIP

Home telephone number

0																			
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Work telephone number

0																			
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mobile telephone number

0	7																		
---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

E-MAIL if different from above

--	--	--	--	--	--	--	--	--	--

If the address is different from the student's please complete this section

ADDRESS (line 1)
 ADDRESS (line 2)
 TOWN
 COUNTY
 POSTCODE

We send general information out via Parentmail which you would access through the email address you have provided.

Contact 1		Contact 2		Both	
------------------	--	------------------	--	-------------	--

When we issue Progress Reports a copy can be sent either:

Contact 1		Contact 2		Both	
------------------	--	------------------	--	-------------	--

CONTACT 3 is optional - Please give details of a third person we could contact in the event of an emergency.

TITLE	
SURNAME	
FIRST NAME	
RELATIONSHIP	
Contact telephone number	

Is there a person to whom contact with the child should be denied. If you answer YES please provide details	YES	NO
--	------------	-----------

NAME	
RELATIONSHIP TO THE CHILD	
OTHER RELEVANT INFORMATION	

MEDICAL INFORMATION

NAME of DOCTOR
NAME of SURGERY

Tick the box if your child has any of the following medical or sensory problems

Tick	Medical/Sensory	Medication/Care Plan	Yes/No
	Allergy	1. Does your child have a care plan? 2. Does your child student have an epipen? 3. It is your responsibility as a parent/guardian to supply the school with spare medication such as epipens. It is also your responsibility to renew out of date medication. 4. Further information will be required.	Yes/No Yes/No Yes/No
	Asthma	1. Does your child have a care plan? 2. Does your child pupil carry an asthma pump? 3. In an emergency situation we do hold an asthma pump and chamber at school should the student require it. You will need to sign a consent. Please indicate if you would like to complete the form. 4. Further information will be required.	Yes/No Yes/No Yes/No
	Diabetes	1. Does your child have a care plan? 2. Does your child need to take medication at some point during the through the school day? 3. The student's medical box can be stored in reception (spare needles, sugar boosts etc) We would advise to keep a small supply for emergency purposes. Would you like your child to have this facility? 4. Further information will be required.	Yes/No Yes/No Yes/No
	Epilepsy	1. Does your child have a care plan? 2. Does your child need to take medication during the school day? 3. Further information will be required	Yes/No Yes/No
	Hearing	1. Does your child have a care plan? 2. Further information will be required by our Hearing Resource Centre	Yes/No
	Visual	1. Does your child have a care plan? 2. Further information will be required by the SENCO	Yes/No

Please give below information on any other condition or problem we should know about. If you wish you can attach a covering letter to this form.

Does your child have any other condition that requires medical treatment, including medication? **YES / NO**

If **YES** please give brief details:

Is your child allergic to any medication? **YES / NO**

If **YES** please give brief details:

Does your child have any special dietary requirements – including food allergies?

YES / NO

If **YES** please give brief details:

When did your child last have a tetanus injection? _____

Please inform the School in the space below if your child is on any long term medication and provide information on any condition or problem we should know about.

IT IS VERY IMPORTANT TO NOTIFY THE SCHOOL OF ANY FUTURE CHANGES IN THE MEDICAL CIRCUMSTANCES OF YOUR CHILD.

NATIONAL ASSEMBLY INFORMATION

We are also required to collect additional information as set out below. You have the option in each area of not answering the question. However, if you do so it will help the school, the LEA and the National Assembly in providing for education in Wales. We have chosen to arrange the categories in alphabetical order in each section.

National Identity – please tick one box

- British
 English
 Irish
 Scottish
 Welsh
 I do not wish a national identity to be recorded
 Other (please specify)

Religion – please tick one box

- Christian
 Hindu
 Muslim
 Sikh
 No religion
 I do not wish a religion to be recorded
 Other (please specify)

Ethnic group – please tick one box and SPECIFY if appropriate

- Asian or Asian British
 Please specify
- Black or Black British - African
 Black or Black British - Caribbean
 Black or Black British – any other
 Black background. Please specify
- Chinese or Chinese British
 Mixed – White and Black Caribbean
 Mixed – White and Black African
 Mixed – White and Black Asian
 Mixed – any other mixed background
 Please specify

- White – British
- White – Traveller of Irish heritage
- White – Gypsy / Roma
- White – any other White background
Please specify
- I do not wish an ethnic background to be recorded
- Other (please specify)

The Welsh Language

Welsh speaking ability – tick the appropriate box

- This pupil is fluent in Welsh
- This pupil speaks Welsh but not fluently
- This pupil cannot speak Welsh

Welsh at Home - tick the appropriate box

- This pupil speaks Welsh at home
- This pupil does not speak Welsh at home

Welsh with Parents / Guardians - tick the appropriate box

- This pupil speaks Welsh with one parent / guardian
- This pupil speaks Welsh with both parents / guardians
- None of the above
- Not applicable

Welsh with Siblings - tick the appropriate box

- This pupil speaks Welsh with siblings
- This pupil does not speak Welsh with siblings
- Not applicable

Home Language - Please tick only the main spoken language

- English
- Welsh
- Other - please specify

Child's First Language: _____

I confirm that the above information is accurate. Signed: _____

SCHOOL GENERAL INFORMATION

Please tick one box only in each section

Travel Arrangements to school

Does your child require school transport? <small>*Application needs to be completed</small>	
Does your child walk to school?	
Does your child travel to school by car?	
Does your child travel to school by taxi?	
Does your child travel to school by bicycle?	
Does your child travel to school by public transport?	

Meal Arrangements during school

Does your child bring a packed lunch?	
Does your child have free school meals? <small>*Application form needs to be completed</small>	
Does your child have paid school meals?	
Does your child have other arrangements?	

INCLEMENT WEATHER

In the event of inclement weather students will be sent home as usual by bus. If your child is NOT travelling by bus what arrangements do you wish

The child should remain at school until collected	Yes	No
The child should walk home	Yes	No
The child should walk to the house of a friend / relation	Yes	No
*Other – Please provide information		

LOCAL AUTHORITY INFORMATION

The following information is required for local authority.

Does this child have a social worker?	Yes	No
Is this child in Local Authority care?	Yes	No
Has this child been in Local Authority care?	Yes	No
Does this child have a statement or SAPRA?	Yes	No
Is your child a Young Carer?	Yes	No
Does your child have a special education need? Please explain in the box below.	Yes	No

HOME SCHOOL AGREEMENT

As a school we will:	As a Parent/Guardian I / We will:	As a Student I will:
<ul style="list-style-type: none"> Encourage good attendance and punctuality and follow up all unexplained absences. 	<ul style="list-style-type: none"> Ensure my child attends school every day on time Inform the school in the morning if my child is absent and give a reason. Inform the school in writing of any change of contact details or address. 	<ul style="list-style-type: none"> Attend school every day on time.
<ul style="list-style-type: none"> Insist that school uniform is worn by all students. Ensure that all students know what equipment they need. Provide all students with a Planner and a Lunch Card 	<ul style="list-style-type: none"> Ensure my child wears correct uniform according to Penglais policy. Ensure my child has the correct books and equipment for school. 	<ul style="list-style-type: none"> Always wear full school uniform, with no additions. Bring the correct equipment to school.
<ul style="list-style-type: none"> Set the highest standards for your child's education. Report regularly on your child's progress. Provide the best teaching that we can. Provide a homework timetable and a planner. Set and mark homework regularly. Praise good work and effort. 	<ul style="list-style-type: none"> Encourage my child to do their best. Encourage my child to record and complete homework. Check and sign my child's planner weekly. Make the school aware of any concerns that may affect my child's work. 	<ul style="list-style-type: none"> Always do my best. Use my planner to record homework and complete homework assignments on time.
<ul style="list-style-type: none"> Apply sanctions fairly to support our Positive Behavior Policy Monitor student's online activity while at school using the Local Authority's Smoothwall filter. Use Classcharts to inform parents/guardians. 	<ul style="list-style-type: none"> Support the school's Positive Behavior Policy not only at school but also on the way to and from school. Encourage my child to have a high standard of behavior at all times. Make the school aware of any concerns that may affect my child's behavior. Monitor my child's online activity. 	<ul style="list-style-type: none"> Work quietly and sensibly in class. Follow all school policies not only at school but also on the way to and from school. Keep the school tidy and free of litter. Respect the school's staff, peers and the local community. Behave appropriately while online.
<ul style="list-style-type: none"> We will ensure our school environment is open, welcoming and safe. We do 	<ul style="list-style-type: none"> I will encourage my child to respect the open, welcoming 	<ul style="list-style-type: none"> I will respect the open, welcoming and safe school environment.

<p>not expect anyone to bring illegal substances or potential weapons into school.</p> <ul style="list-style-type: none"> • If we believe anyone to be in possession of illegal substances or potential weapons, a voluntary search will be done by staff. • Concerns raised by students, parents/guardians and staff will be dealt with appropriately, Where matters are not suitable for us to resolve, referrals will be made to other agencies including the Police 	<p>and safe school environment.</p> <ul style="list-style-type: none"> • I will ensure my child understands that for safety reasons all students are not to bring illegal substances or weapons into school. • Where I have concerns regarding my child or any other student I will inform a staff member. 	<ul style="list-style-type: none"> • I will refrain from bringing any illegal substances or potential weapons on school transport or into the school environment. Where I have any concerns regarding other students I will inform a staff member.
<ul style="list-style-type: none"> • Hold regular meetings for parents/guardians and send home a newsletter and update the school website regularly. • Communicate with families using the ParentMail and Classcharts Apps. • Respond to any concerns within two working days. 	<ul style="list-style-type: none"> • Attend parents’ evenings about my child’s progress. • Sign up to ParentMail and Classcharts so that I am kept informed of my child’s progress in school. • Keep the school informed of any problems likely to affect my child’s learning. Ensure that the school always has up-to-date information for emergency contact. 	<ul style="list-style-type: none"> • Take school letters home to my parents/guardians. • Let my teachers know if I have any concerns which affect my learning or wellbeing.
<ul style="list-style-type: none"> • Enrich the curriculum by providing extra-curricular activities. 	<ul style="list-style-type: none"> • Support school community events. • Encourage my child to participate in school clubs, societies, sporting and musical activities. 	<ul style="list-style-type: none"> • Take a pride in the school and make an effort to improve it. • Use the opportunities offered to me to participate in clubs, societies, sporting and musical activities.

Student’s signature

Date

Parent/Guardian’s signature

Date

IT POLICY – PARENTAL/GUARDIAN CONSENT

This policy is primarily intended to reassure parents/guardians that the school will take active steps to protect students from accessing or distributing offensive material in school, especially when using the Internet, and to make it absolutely clear to parents/guardians and students that malpractice such as hacking and vandalism will not be tolerated. Incidents of malpractice will be investigated and sanctions enforced as appropriate. Please ensure that you and your child read the policy before you sign this form.

1. Students are responsible for proper use of the IT equipment in school including using the Internet and the Intranet.
2. General school rules including those regarding good behaviour and the proper treatment of school property will apply when using the IT equipment.
3. The school will teach students to respect the law and the legal requirements regarding the proper use of IT equipment.
4. The school will ensure that the students who use computers comply with the standards set out in this policy. Where there is suspicion or evidence of malpractice the school may access student files.
5. Students are not allowed to use any IT system in school without the specific permission of a teacher.
6. Teachers at Penglais School will guide students towards appropriate materials and use of IT. The following are not permitted:
 - (a) Sending or displaying offensive material including pornography;
 - (b) Using obscene language;
 - (c) Harassing, insulting or attacking others verbally or electronically;
 - (d) Damaging computers, computer systems or networks;
 - (e) Violating copyright laws;
 - (f) Logging on as another user or altering someone's password;
 - (g) Trespassing in other students' folders, work or file;
 - (h) Hacking;
 - (i) Deleting or amending files, directories or settings on the system;
 - (j) Intentionally wasting resources;
 - (k) Playing games during lesson time.
7. Where students bring IT data into School from a home computer then the School expects that parents/ guardians will ensure that they have provided guidance to prevent potentially offensive material being accessed.
8. The School will consider each violation of the above rules individually but sanctions can include a formal reprimand, departmental detention, Headteacher Detention and exclusion. Additional disciplinary measures will be taken for serious and / or repeated violations of the rules including restricting access to school computers and informing the police or the local authority, should that be appropriate.

I consent and agree with the school IT Policy

Signed: _____ **Relationship to child** _____

Name (print): _____ **Date:** _____

VISITS – GENERAL CONSENT FORM

By signing this form you will have given us information which we will use to allow your child to take part in School educational visits. Obviously we will contact and seek your permission before every visit. We intend to use this form to up-date our centrally held records so that you will not need to provide personal and medical notes every time a visit takes place. We will take details of the child's address, contact numbers and doctor's address from this Admission Form. We will, of course, ensure that no visit takes place without your permission being sought and the Leader having access to the necessary information on your child from our records.

Declaration

I agree to my child receiving any medication as instructed and to any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present. By signing this form I also acknowledge the need for my child to behave responsibly on visits.

Signed: _____ **Relationship to child** _____

Name (print): _____ **Date:** _____

PHOTOGRAPHS – GENERAL CONSENT FORM

From time to time photographs or filming of students are taken in a number of situations which may include everyday classroom activities, sports fixtures, charity events, school productions, trips and fieldwork etc. The school often photographs students or allows newspaper or other media organisations to do so. The images publicise the work of the school and aspects of school life which would interest parents/guardians and members of the public. They may also be shared on the school's social media pages. Rather than seek permission on every individual occasion which would be time consuming, the school is asking for general permission to use photographs or include students in filming when it is appropriate to do so.

I give permission for my child to be either photographed or filmed whilst on roll at Penglais School

Signed: _____ **Relationship to child** _____

Name (print): _____ **Date:** _____

If you do not wish your child to be photographed or filmed you MUST contact the Headteacher in writing.

PENGLAIS PTA

All parents automatically become members of the association that supports the school and aims to foster good relationships between staff, parents/guardians friends of the school. The PTA provides a forum for discussion, an informal channel for communication, social events and fund-raising activities. All monies the PTA raises goes back into the school. We would contact your by email address.

Yes	I would like to be a member	No	No I would prefer not to at this present time
------------	------------------------------------	-----------	--

FOR OFFICE USE ONLY

Member of staff interviewing:

Page	Documents required		Yes
Page 3	All Medical information	Allergy	
Page 3	All Medical information	Asthma	
Page 3	All Medical information	Diabetes	
Page 4	All medical information	Epilepsy	
Page 4	All Medical information	Hearing	
Page 4	All Medical information	Visual	
Page 5	Transport application	Ask at reception	
Page 5	FSM application	Ask at reception and contact Local Authority	

Completion by staff:

Student name	
Admission number	
Date of admission	
Year group	
Registration/Tutor group	
Home School Agreement - Signed	
ICT Policy - Signed	
Visit General consent - Signed	
Photographs General Consent - Signed	
This form processed by and date	
This form seen by Year Leader and date	
This form has been seen by Student Services and date	