



TINY STEPS ACADEMY AND NURSERY

Admissions Form

Please note that this admissions form is for Tiny Steps Academy and Nursery provisions only and NOT Reception to Year 6

DETAILS OF THE CHILD Preferred surname Legal surname First name Known name Date of birth (DD/MM/YY) Middle names Home telephone Gender PLEASE CIRCLE Μ F Nationality Home address Religion Please detail any court orders applying to the Postcode child (eg Ward of court, Legal rights of access) First language ☐ ENGLISH ☐ OTHER IF OTHER, PLEASE STATE ☐ ENGLISH ☐ OTHER Language spoken at home IF OTHER, PLEASE STATE English as an additional language? YES NO ☐ YES Any parent serving in the Armed Forces? NO Has your child ever lived in a YES Siblings: If your child has any brothers or sisters Service Family environment? □ NO who attend this school please provide their names Was the child adopted from Care? YES NO YES Is your child entitled to free school meals? NO FOR OFFICE USE ONLY NOTES DATE APPLICATION RECEIVED **BIRTH CERTIFICATE SEEN** PLACE OFFERED

In order that letters can be addressed correctly please complete the following. Please make it clear where parents are separated so we can communicate effectively with both parents.

PARENT/GUARDIAN 1	PARENT/GUARDIAN 2
Title & Surname	Title & Surname
Address if different from CHILD'S (OVERLEAF)	Address IF DIFFERENT FROM CHILD'S (OVERLEAF)
Postcode	Postcode
CONTACT DETAILS	
PARENT/GUARDIAN 1	PARENT/GUARDIAN 2
Legal parental responsibility?	0 Legal parental responsibility? YES NO
Relationship to child?	Relationship to child?
Gender PLEASE CIRCLE M F	Gender PLEASE CIRCLE M F
Title First name	Title First name
Surname	Surname
Address	Address
Postcode	Postcode
Home phone:	Home phone:
	MAIN Work phone:
Mobile:	MAIN Mobile: MAIN
Email:	^{MAIN} □ Email: □
EMERGENCY CONTACT DETAILS	5
EMERGENCY CONTACT 1	EMERGENCY CONTACT 2
Legal parental responsibility?	0 Legal parental responsibility? YES NO
Relationship to child?	Relationship to child?
Gender PLEASE CIRCLE M F	Gender PLEASE CIRCLE M F
Title First name	Title First name
Surname	Surname
Address	Address
Postcode	Postcode
Home phone:	Home phone:
Work phone:	Work phone:
Mobile:	Mobile:

MEDICAL DETAILS			
Name of doctor Telephone Medical practice name		Please provide details of any medical conditions that the school should be aware of and of any emergency action that should be taken (eg asthma, epilepsy, allergies). You will need to also complete a Medical Conditions	
Practice address		Form. Please ask for one at reception. MEDICAL CONDITIONS	
Postcode			
Do you give permission for the school to call a doctor?	☐ YES ☐ NO		
Do you give permission for the school to administer first aid?	YES NO		
ADDITIONAL MEDICAL DE			
Please provide details of any food allergies You will need to complete a Food Allergies Form.		Please provide details of any special needs that the child has that school needs to be aware of.	
FOOD ALLERGIES		DETAILS	
Does your child have sight problems? IF YES, PLEASE ADVISE	☐ YES ☐ NO		
Does your child have hearing problems? IF YES, PLEASE ADVISE	☐ YES ☐ NO		
		WENEED TO SEE YOUR CHILD'S BIRTH CERTIFICATE Please bring your child's birth certificate along with you or supply a copy. If there is any other information you	

ADDITIONAL INFO	RMATION	
Please give details of any oth	er information that you would like	e to share with the school about the child.
ADDITIONAL RESE	ONSIBILITY	
	rmission to collect your child (mu	st be 16 or older)
Name	Phone	Relationship to child
Name	Phone	Relationship to child
Name	Phone	Relationship to child
SIGNATURE		
PARENT/GUARDIAN		DATE
WE WOULD LIKE TO SHARE YOUR O	CONTACT DETAILS WITH YOUR LOCAL CI T WISH FOR THIS INFORMATION TO BE S	HILDREN'S CENTRE. SHARED.
		its statutory responsibilities for the provision of education to School Standards and Framework Act 1998. Some of this data

will be shared with the Local Authority and may be shared with other agencies that are involved in the health and welfare of school children.

NATIONALITY, ETHNICITY, LANGUAGE & RELIGION

PEASE NOTE: THIS INFORMATION IS REQUIRED FOR DfE STATISTICAL PURPOSES

Please study the list below and tick the correct category for the pupil named on this form. Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture, ancestry of family history. Ethnic background is not the same as nationality or country of birth.

Nationality:			
ETHNIC ORIGIN			
WHITE:		ASIAN OR ASIAN BRITISH:	
British		Indian	
Irish		Pakistani	
White European		Bangladeshi	
White – Other PLEASE STATE		Any other Asian background PLEASE STATE	
Gypsy/Roma			
Traveller of Irish Heritage		BLACK OR BLACK BRITISH:	
MINER		African	
MIXED:		Caribbean	
White and Black Caribbean		Any other Black background PLEASE STATE	
White and Black African		01:	
White and Asian Any other mixed background PLEASE STATE		Chinese Any other ethnic background PLEASE STATE	
I DO NOT WISH AN ETHNIC BACKGROUND (SATEGUR	Y TO BE RECORDED	
LANGUAGE		RELIGION	
Bengali		Christian	
Hindi		Islam	
Cantonese		Hindu	
Italian		Buddhist	
English		Jewish	
Panjabi		No religion	
Greek		Muslim	П
Portuguese		Sikh	П
Gujerati			
French		Other PLEASE STATE	
Other PLEASE STATE			

USING IMAGES OF CHILDREN - CONSENT FORM

Occasionally, we may take photographs of the children at our school. We may use these images in our school's prospectus or in other printed publications that we produce, or on our website. We may also make webcam recordings for school-to-school conferences, monitoring or other educational use.

From time to time, the media will take photographs or film footage of a visiting dignitary or other high profile events at our school. Pupils will often appear in these images, which may appear in local or national newspapers, or on televised news programmes.

To comply with the Data Protection Act 1998, we may need your permission before we can photograph or make recordings of your child. **Please answer questions 1 – 5 below**, then **sign and date** the form where shown.

Name of child	
1 May we use your child's photograph (unidentified) in the school prospectus and any other printed publications that we produce for promotional purpose?	YES NO
2 May we use your child's image (unidentified) on our website?	YES NO
3 May we record your child's image (unidentified) on video or webcam?	YES NO
4 Do you consent to your child being photographed or filmed in press events agreed by the school?	YES NO
5 Do you consent to your child's name being used in any caption information for news organisations?	YES NO

PARENT/GUARDIAN	DATE	
		••••••

☐ I have read and understood the conditions

Data Protection Act 1998 – The school is collecting this data in order to meet its statutory responsibilities for the provision of education to children in accordance with the requirements of the Education Act 1996 and the School Standards and Framework Act 1998. Some of this data will be shared with the Local Authority and may be shared with other agencies that are involved in the health and welfare of school children.