Admissions Form 2027-2028

OFFICE USE ONLY Original Birth certificate/ passport seen & checked (date and initial) …… Original proof of current address seen & checked (date and initial) …… Council Tax/Water bill Year Group …… Start date …… House Group……	
About your child- Parents to complete	
Childs legal Surname:	Childs legal Forename:
Preferred Surname:	Preferred Forename:
Middle Name:	Date of Birth:
Sex at birth:	Preferred pronouns:
Ethnicity:	Country of Birth:
Religion:	First Language:
Address: Postcode:	
Child lives with:	
Parent/ Legal guardian details We are required to record the names, contact details and addresses of every person with parental responsibility for a child under the children act 1989/2004. **Please note that Contact number and Email address must be different for each guardian.**	
Parent/ Guardian 1	
First & Last name:	Mr/ Mrs/ Ms/ Miss/ Dr
Relationship to child:	Date of Birth:
Mobile Number:	Alternative number:
Emergency contact priority: ☐1 ☐2	Do you have Parental responsibility: ☐Yes ☐No
Email:	National Insurance Number:
Address (*if different from child)*: Postcode:	
Are you a member of the armed forces? (Please provide details)	
Parent/ Guardian 2	
First & Last name:	Mr/ Mrs/ Ms/ Miss/ Dr
Relationship to child:	Date of Birth:
Mobile Number:	Alternative number:
Emergency contact priority: ☐1 ☐2	Do you have Parental responsibility: ☐Yes ☐No
Email:	National Insurance Number:
Address (*if different from child)*: Postcode:	
Are you a member of the armed forces? (Please provide details)	

Additional emergency contacts Please provide any additional emergency contacts that are not Parent Guardian 1 or 2. Please write them in order of contact priority		
Contact Name:	Contact Number:	Relationship to Child:
Contact Name:	Contact Number:	Relationship to Child:
Contact Name:	Contact Number:	Relationship to Child:

Details of siblings who attend St Francis	
Name	**Year Group**

Previous school information	
School name:	
School address:	
How long have they attended their previous school:	

Looked after children	
Is your child in care? ☐ Yes ☐ No	
If yes, please provide details	
Post looked after children	
Is your child adopted? ☐ Yes ☐ No	
If yes, are you happy for a meeting in school to discuss support available?	

Welfare	
Are there any linked agencies working with your child?	
Agency name:	
Telephone number:	Contact name:
Address:	

Medical Information

Allergies	
Has your child been formally diagnosed with an allergy through GP allergy testing?	☐ Yes ☐ No *If yes, please note that you will be required to provide school with an up-to-date Allergy plan provided by your GP.*
If yes, what is the allergy to, and what reaction normally happens? i.e. rash, swelling, itching	
Is your child an Epi-pen user?	☐ Yes ☐ No *If yes, please note that you will be required to provide school with **at least** one spare Epi-Pen*
Do they have another other allergy medication? i.e. Cetirizine/ Piriton	☐ Yes ☐ No *If yes, please note that you will be required to provide school with any allergy medication, labelled, to keep in class for your child.*

Is your child allergic to any of the below?		
Plasters ☐	Face paint ☐	Animals ☐

Asthma	
Does your child have asthma?	☐ Yes ☐ No *If yes, please note that you will be required to provide school with an up-to-date asthma plan provided by your GP.*
If your child has asthma, are they a brittle asthmatic?	☐ Yes ☐ No
Does your child have an inhaler?	☐ Yes ☐ No *If yes, please note that you will be required to provide school with an inhaler and blue spacer.*

Dietary Needs	
Does your child have an allergy/ intolerance to any food?	
Is your child Vegetarian, Vegan or Pescatarian? Please specify	
Can your child eat beef?	☐ Yes ☐ No
Can your child eat pork/ gammon/ ham?	☐ Yes ☐ No
Can your child eat fish?	☐ Yes ☐ No
Can your child eat Eggs?	☐ Yes ☐ No
Any other Dietary needs:	

Medical Needs	
Does your child have any other medical needs we should be aware of? *Please provide details*	
Does your child take any prescribed medication?	☐ Yes ☐ No *If yes, please note that you will be required to provide school with any prescribed medication your child may need throughout the school day.*
Does your child have any physical or mobility difficulties? *Please provide details*	
Does your child have a care plan?	☐ Yes ☐ No *If yes, we will contact you to arrange a separate meeting*

Special Educational Needs
Please indicate below if your child has any special educational needs. For example, an educational healthcare plan, a Send support provision plan or if they have been referred to any external agencies e.g. ADHD service, Speech and Language therapy or Occupational health.

GP Details	
Surgery Name:	GP Name:
Telephone Number:	NHS Number:
Address:	

I can confirm that the above medical information is accurate	
Parent/ Guardian name- please print	
Parent/ Guardian signature	

Pupil premium/ Free school meals

We ask that **all parents and carers check whether their child is eligible for Free School Meals (FSM)**, regardless of their current circumstances. This is a quick and simple process and can be completed using the link provided below.
https://apply.cloudforedu.org.uk/ofsm/entrust

Once you have completed the check, please enter the **reference number** you receive in the space provided below, **whether your application is successful or unsuccessful**.
Please note that if a reference number is not provided, we will contact you with the information and link needed to complete an FSM eligibility check.

We strongly encourage parents and carers to complete the application themselves wherever possible. However, if you experience any difficulties with the process, we can use the information provided in the pupil premium section below to submit an application on your behalf. By providing these details you are consenting to us submitting a free school meal application on your behalf.

Reference number:

Pupil Premium	
Parent/ Guardian 1	
Title	Mr/ Mrs / Miss / Ms / Dr
Parent/Guardian Full Name	
Parents DOB	
Sex	MALE / FEMALE
Contact telephone number	
Contact email address	
National insurance number	
Home address	
Parent/ Guardian 2	
Title	Mr/ Mrs / Miss / Ms / Dr
Parent/ Guardian Full Name	
Parents DOB	
Sex	MALE / FEMALE
Contact telephone number	
Contact email address	
National insurance number	
Home address	

Nursery Funded Hours

Please only complete the below section if you are applying for a nursery space for your child.

Are you entitled to 30 hours free childcare?
☐ Is your child 3 years old- Please state your childs date of birth _____ ☐ Are you a joint parent family with both parents working a minimum equivalent to 16 hours at National Minimum wage or National Living wage ☐ Are you a joint parent family with one parent working (a minimum equivalent to 16 hours at National Minimum wage or National living wage), and one parent unable to work as they are an official carer or in receipt of disability benefit ☐ Are you a lone parent who is working a minimum equivalent to 16 hours at National Minimum wage or National living wage ☐ Do you live in England
If you think you may be entitled to the free 30 hours then we are urging families to use the online calculator checker. Please go to https://www.gov.uk/childcare-calculator . The process takes about 10 minutes, and it will give you an indication at the end of the process to whether you are eligible or not. If you are eligible, you will be able to click on 'Apply Now'.
☐ I/ We have completed the online 'childcare calculator' and it indicates we are eligible to apply

☐ I/ We have applied and have been successful in securing an eligibility code	Please provide your eligibility code:

Which days are you looking to apply for?									
Monday ☐		Tuesday ☐		Wednesday ☐		Thursday ☐		Friday ☐	
AM ☐	PM ☐	AM ☐	PM ☐	AM ☐	PM ☐	AM ☐	PM ☐	AM ☐	PM ☐

Helpful links

https://childcare.beststartinlife.gov.uk/support#main-content

School Lunches

At St. Francis Primary School we promote a healthy lifestyle. Throughout lunchtime, we ensure that pupils have the opportunity to take part in physical activity. We provide a variety of equipment for children to play games with each other and our dinner supervisors encourage children to take part. On certain days of the week the school also employs sports coaches to run sports and games during lunchtime.

We are also proud to provide children with the opportunity to have a healthy wholesome lunch. Every lunch time pupils have a choice of main meals accompanied by a healthy salad bar and can also choose from a dessert. Our food is freshly prepared on site by our expert catering team.

Our menus can be found on our website
https://www.stfrancisprimaryandnursery.co.uk/page/?title=School+Dinners&pid=89

School Lunches Please indicate what days your child will be having a packed lunch/school lunch. Please note that any changes to this will need to be put in writing to the school office, a half term in advance.									
Packed Lunch					**School Lunch**				
Mon ☐	Tue ☐	Wed ☐	Thur ☐	Fri ☐	Mon ☐	Tue ☐	Wed ☐	Thur ☐	Fri ☐

Children do have the option to bring in packed lunches. If you do opt for a packed lunch, please remember that we are a 'nut aware' school, which means that children are not allowed to bring anything containing nuts into school. Packed lunches should be healthy and balanced; no fizzy drinks or sweets please.



Parental Consent

At St Francis CE Primary School & Nursery, we sometimes take photographs of pupils to support the assessment of their learning and to celebrate school life and achievements.

We may use these photographs within school, such as on display boards, and in school publications. Photographs shared in newsletters, on social media, or on the school website will normally only show the backs of children's heads or otherwise avoid identifying pupils.

If we would like to use a photograph that clearly shows your child's face on the school website, in promotional materials, or for advertising purposes, we will always seek your specific consent beforehand.

We would like your consent to take and use photographs of your child in the ways described above. If you do not wish us to do so, this is not a problem, and we will respect your preferences.

Please indicate whether you give consent in each case by circling the appropriate answer on the right-hand side of the form.

Photo Consent	
My child's photo to be displayed in school	YES / NO
My child's photo to be included in the newsletter	YES / NO
My child's photo to be displayed on the school website	YES / NO
My child's photo to be used on Twitter/X and other social media (This will only be the back of heads/ unidentifiable images unless we have requested specific consent)	YES / NO
To photographs being taken of my child (individual and group photos) by the school photographer. The group photos will be made available for other parents to purchase	YES / NO
Medical Consent	
I give permission for my child to receive basic and/or emergency first aid by a trained first aider. (This includes cuts cleaned with non-alcoholic Medi wipes and non-allergenic plasters)	YES / NO
Other Consent	
I give my permission for my child to attend Supervised visits to local destinations away from the main school site i.e. swimming baths, park, library visits, sporting events	YES / NO
My child being changed by a member of staff (if applicable)	YES / NO
I give permission for my child to watch U or PG certificate content in school	YES / NO
I give permission for my child to be transported in Teachers' or other adults' cars to attend sporting or other events at local schools with prior notification	YES / NO

Page continued.....

- Parents have the right to change the conditions of consent in writing to the Head Teacher at any time
- Children's names will not be used with images unless separate prior consent has been obtained
- We will only use images of children who are suitably dressed
- All information will be used in conjunction with the Data Protection Act 1998
- As a Parent/ Carer I agree that if we take photographs or video recordings of our child/ren they will not include other children, they will only be used for personal and family use. I understand that where consent has not been obtained from other parents I would be in breach of Data Protection Act 1998 if I were to take and/or use photos of other children
- School internet has a filter to prevent any unacceptable or restricted sites
- Parents will be notified of events which require payments and or packed lunches by letter, email or newsletter

Please sign below to acknowledge you have read and completed the above consents.

Childs Name_____Class_____

Parent Name _____ Parent Signature _____

Date _____

Authorised persons with permission to collect my child

Name…… Relationship to child ……

Name…… Relationship to child ……

Name…… Relationship to child ……

Name…… Relationship to child ……

Name…… Relationship to child ……

Name…… Relationship to child ……

Name…… Relationship to child ……

Name…… Relationship to child ……

There may be occasions when you need your child to be collected from school by someone who is unfamiliar to our staff. In these situations, we operate a **family password system**. You will be asked to provide a password, which should be shared with the person collecting your child on your behalf.

Family password_____

If your child is in **Early Years or Key Stage 1**, we would encourage you to email a photograph of any regular collectors to **parents.stf@fioretti.co.uk**. These photographs will be kept confidential and shared only with your child's class teacher. This helps staff become familiar with family members and other adults who may regularly collect your child, supporting a safe and smooth collection process.

Copies of this form are kept by class teachers and can be updated at any time. Authorised collectors may be added or removed as necessary.

Please inform the school office promptly of any changes to your child's collection arrangements.