



King Edward VII Academy

Welcomes you!



Important Documents

Please complete the documents in this booklet and give to your child to bring with them on the first transition day 26th June 2018.

STUDENT NAME: _____



Have you signed / authorised the following documents for return on the first transition day?

Student admission form	
Photographic images consent	
Administration of Medicines and treatment consent form	
Academy Educational visits and off-site Activities Consent form	
Home School agreement	
Biometric recognition	
Summer school expression of interest	



Student Admission Form

Data Protection Act 2017(in compliance with GDPR) : The school is registered under the Data Protection Act for holding personal data.

PLEASE BRING YOUR CHILDS PASSPORT OR BIRTH CERTIFICATE

Forenames		Legal Surname	
Date of Birth e.g. 12 06 98			Gender
Student's Country of Birth			Nationality
Last School	Name		
	Address		
	Contact		
Siblings at KES <i>(brothers and/or sisters)</i>	Name		Year
Student's Home Address			
			Postcode
Home Telephone Number			
Email address of main carer			
Details of ALL adults living at student's home address	Relationship to student		
	Title		
	Forename		
	Surname		
	Date of Birth		
	Daytime Tel. Number	Home/Work	Home/Work
Other Emergency Contacts Please give names, daytime telephone numbers and relationship to student			

Medical Details				
Doctor's Name		Tel. No.		
Surgery Address				
Medical Information Parents may convey relevant medical information here or under separate cover to the school. The information is processed electronically but in coded form to enable staff to respond to student's needs.				
Young Carer	YES/NO			
Special Educational Needs	Stage		Statement	Yes/No
	Area of concern			
Additional Academic Information				
Subjects enjoyed				
Sporting, Recreational Interests				
Has your child ever been subject to: <i>(tick all that apply)</i>	Attendance Panel			
	Fast Track			
	Fixed Penalty Notice			
Additional Parental Contacts For the purposes of school records an additional parental contact is defined as a natural parent or any other person who is his or her legal guardian but is not <u>resident</u> with the student.				
Relationship				
Title				
Forename				
Surname				
Address				
		Postcode		Postcode
Home Tel. No.				
Daytime Tel. No.				
I declare the information on this form to be correct to the best of my knowledge				
Signed.....(Parent/Carer)				
Date.....				

Ethnicity: (Please tick one box only)

White

British	
Irish	
Traveller of Irish	
Gypsy / Roma	
European	
Other White	

Mixed

White & Black	
White & Black	
White & Asian	
Any Other mixed	

Asian or Asian Background

Indian	
Pakistani	
Bangladeshi	
Other Asian Background	

Black and White British

Caribbean	
African	
Any other black	

Chinese

Chinese	
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Any other Ethnic Background

Any other ethnic background	
I do not wish an ethnic background to be recorded	

Home Language

English	
Hindi	
Chinese	
Russian	
Polish	
Lithuanian	
Portuguese	
Other	

Religion

Christian	
Hindu	
Sikh	
Jewish	
Muslim	
Buddhist	
No Religion	
Other	

Mother Tongue

English	
Other (please state)	

Parent speaks English

Yes	
No	

Additional Information: (Please tick one box in each section)

Travel arrangements

Bicycle	
Car	
Public Transport	
School Coach	
Taxi	
Train	
Walks	
Car share	

Lunch type

Free School Meals	
School Lunch	
Sandwiches	

Aim Higher Information

Has any child or adult within your household(s) received higher education e.g University, Polytechnic or any other higher education institution?	
Yes	
No	

Are you (parent/s and guardian/s) serving in regular HM Forces military units?	Y / N
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Why did you choose KES for your son/daughter?

Any other information (if your child is a member of a particular club or has an interest, please

Your child may occasionally need a letter from parents/carers to explain an absence or to leave school during the day, e.g. for a medical appointment. We do therefore require a specimen signature from parents/carers:

Parent/Carer	(Sign)	(Print)
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Parent/Carer	(Sign)	(Print)
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FOR OFFICE USE ONLY

<i>Birth Certificate seen</i>	<i>Y / N</i>
<i>Court Order seen (if applicable)</i>	<i>Y / N</i>
<i>SEN statement seen (if applicable)</i>	<i>Y / N</i>
<i>Home / School agreement signed</i>	<i>Y / N</i>
<i>Photo Consent signed</i>	<i>Y / N</i>
<i>Medical Consent signed</i>	<i>Y / N</i>
<i>School computer use signed</i>	<i>Y / N</i>
<i>Music tuition required</i>	<i>Y / N</i>
<i>(Signed)</i>	<i>(date)</i>

(Print name)

Data transferred to SIMS by: _____ *On:* _____

FOR SCHOOL USE ONLY:

DATE OF ADMISSION _____

REGISTRATION GROUP _____

HOUSE _____

UPN _____

YEAR GROUP _____

LANGUAGES _____



Photographic Images Consent Form

To comply with the Data Protection Act 2017 (in compliance with GDPR), we need your permission before we can photograph or make any recordings of your child. Please answer the questions below, then sign and date the form where shown.

This form is valid for the period of time your child attends the School. The consent will automatically expire after this time.

- We will not re-use any photographs or recordings after your child leaves the school.
- We will not use the personal details or full names (which means first name and surname) of any child or adult in a photographic image, on video/DVD, on our website, in our prospectus or in any of our other printed publications.
- We will not include personal addresses, emails, telephone numbers, fax numbers on video, on our website, in our prospectus or in other printed publications.
- If we use photographs of individual children then we will not use the name of that child in the accompanying text or photo caption.
- If we name a child in any text then we will not use a photograph of that child to accompany the article.
- We may include pictures children and staff that have been drawn by the children.
- We may use group photographs or footage with general labels, such as 'making Christmas decorations'.
- We will only use images of children who are suitably dressed.
- We will discuss the use of images with children in an age appropriate way to role model positive behaviour.
- This consent can be withdrawn by parent/carer at any time by informing the Setting in writing.

Name of Child:

Please circle your answer

- | | |
|--|----------|
| • May we use your child's photograph/image in displays around the School? | Yes / No |
| • May we record your child's image or use videos for assessments, monitoring or other educational uses within the setting? (these images or recordings will be used internally only) | Yes / No |
| • May we use your child's photograph/image in our prospectus and other printed publications that we produce for educational and promotional purposes? | Yes / No |
| • May we use your child's image on our website or other electronic communications? | Yes / No |
| • May we record your child's image on webcam for appropriate curriculum purposes? | Yes / No |
| • Are you happy for your child to appear in the media e.g. if a newspaper photographer or television film crew attend an event organised by the school? | Yes / No |

- Are you happy for the school to print images of your child electronically Yes / No

I have read and understood the conditions of use and I am also aware of the following:

- Websites can be viewed throughout the world and not just in the United Kingdom where UK law applies.
- The press are conditionally exempt from the GDPR and may want to include the names and personal details of children and adults in the media.
- I/we will discuss the use of images with our child/ren to obtain their views, if appropriate
- As the child's parents/guardians, we/I agree that if we/I take photographs or video recordings of our child/ren which include other children then we will only use these for personal use.

Signed: _____ (Parent/Carer)

Date: _____



Administration of Medicines and Treatment Consent Form

Name of Student: _____

Address _____

Parent/Carer Contact Numbers Home _____

Work _____

Mobile _____

Date of Birth _____

Name of GP / Health Centre _____

GP / Health Centre Telephone Number _____

Students Illness / Condition _____

Special Instructions _____

Known Allergies _____

Name of Medicine	Dose	Frequency	Expiry Date

All medicines are to be supplied in the original packaging which indicates the expiry date and are clearly labelled with the student's name.

I agree to appropriately trained members of staff administrating medicines/providing treatment to my child as directed above or in the case of an emergency where considered necessary.

Signed _____ Date _____



Academy Educational Visits and Off-site Activities Consent Form

Name of Child:

Name of Parent/Carer:

Please read this form and sign and date it below if you are happy for your son/daughter to do the following:-

- a) To take part in Academy trips and other activities that take place off Academy premises;
and
- b) To be given first aid or urgent medical treatment during any Academy trip or activity.

Please note the following important information before signing this form:

- The trips and activities covered by this consent include:
 - All visits (including residential trips) which take place during the holidays or a weekend.
 - Adventure activities at any time.
 - Off-site sporting fixtures outside of the Academy day.
- The Academy will send you information about each trip or activity before it takes place.
- You can, if you wish, tell the Academy that you do not want your child to take part in any particular Academy trip or activity.

The Academy will always contact parents/carers prior to any activities offered by the Academy – for example, class group visits to local amenities, field trips for examination courses – as such activities are part of the Academy’s curriculum and usually take place during the normal academy day.

MEDICAL INFORMATION

Please complete the medical information section below (if applicable) and sign and date this form if you agree with the above.

Medical Condition	Medication Required

Signed: _____ (Parent/Carer)

Date: _____

King Edward VII Academy



Home - Academy Agreement

Student Name

The academy will –

- Welcome, value and support our students
- Provide an environment and a curriculum which enable students to achieve their targets and their potential
- Set and mark appropriate homework
- Expect and reward high standards of conduct, effort and attendance
- Care for student's safety and well-being by following the Academy policies including Child Protection and Bullying policies
- Be open and welcoming to all parents/guardians
- Encourage parents/guardians to be involved in the daily life of the school
- Keep parents/guardians informed about Academy matters and the progress of their children

Signature Principal Mr Lloyd Brown

L. Brown

PARENTS/GUARDIANS

I will try my best to -

- See that my child attends the Academy regularly, on time and in the correct uniform
- Provide a note explaining any absences
- Support my child in set homework and other home learning
- Let the Academy know of any problems or concerns that may affect my child's work or behaviour
- Support the Academy's policy on behaviour
- Attend Parents' Evenings and any other meetings concerning my child

Signatures

STUDENTS

I will try my best to -

- Attend regularly and on time
- Behave appropriately inside and outside the Academy
- Follow the Academy rules and code of conduct, and complete any sanctions that may be imposed
- Keep the Academy clean, tidy and free from litter
- Get on with others at King Edward VII Academy
- Help to make the Academy a pleasant place in which to work and play
- Work hard and complete my set homework
- Let an adult know if I have any problems or worries
- Take all newsletters and messages home

Signature.....



April 2018

Dear Parent/Carer,

Academy Recognition System

King Edward VII Academy uses a biometric recognition system for catering and printing. There are many advantages of using this system to cover these aspects of school life. You will be able to pay for your child's lunches with one weekly payment and there will be a cash loader to allow students to top up their accounts with cash during the day. Each student will have a printing allocation which will help with their work.

The system works by using several points on a person's thumb/finger to create a unique numerical code. It is the numerical code which is security stored and **not the image of the prints on the person's thumb**. It is impossible to create a diagram of the points on the thumb/finger from the numerical code.

We are aware that you may have concerns regarding the use of this system but its use has been approved by the government. The manufacturers of the system take data protection extremely seriously and we are happy to meet parents to explain how data is protected.

The data is securely stored and destroyed when your child leaves the Academy or when you instruct us to do so. Please can I ask you to complete the slip below?

Yours faithfully,

Lloyd Brown
Principal

.....
Please complete and return

I am ***willing / *unwilling** for my child to use the Academy recognition system. (*Please delete as appropriate).

Student's full name: _____

Signed: _____ (Parent/Carer)

King Edward VII Academy Free Summer School 2018

King Edward VII Academy will be offering primary school students the chance to attend a free Summer School in August 2018.

The Summer School will take place on:- 29th and 30th August 2018, 9.30am-3pm

The aim is for students to have additional time to get used to their new Academy, have fun, prepare for the new term, as well as meet new students from other primary schools.

The Summer School will consist of fun activities each day based around a number of subjects that they will study in Year 7.

It will provide a great opportunity to boost your child's learning during the summer holiday, as well as an additional chance for them to feel comfortable in what will be their new learning environment from September 2018.

In order to secure a their place at the KES Academy Summer School 2018, please complete the consent slip in the important documents booklet and return it on the first of the transition days (Tuesday 26th June) with the KES Academy admission forms. By completing the consent form, you are guaranteed a place in the summer school.

Your next step will be to ensure that you have a packed lunch and a drink with you when you get dropped off at the Academy on, ready for a 9.30am start.

Kind regards,

Oliver Denton and Lang Chung
KES Summer School Co-ordinators
(01553) 773606
Email: oliver.denton@kesacademy.co.uk or
lang.chung@kesacademy.co.uk



Expression of interest in KES Academy Summer School 2018

I, _____ parent/carer of _____
(Parent/carer) (Student Name)

Confirm that we would like a place at King Edward VII Academy Summer School, 29th and 30th August 2018. Please send me further details.

Email address or contact number: _____

Signed: _____ Date: _____



What if you need help?

- Your Head of House can help if you are ill, if you need to phone home or if you have lost something. They will help with most things!
- Your form tutors will try and help you with any worries. Go and see them first.

General Information

Principal:	Mr Lloyd Brown
Address:	King Edward VII Academy, Gaywood Road, King's Lynn, PE30 2QB.
Telephone Number:	(01553) 773606
Email:	office@kesacademy.co.uk
Please visit our website at:	www.kesacademy.co.uk