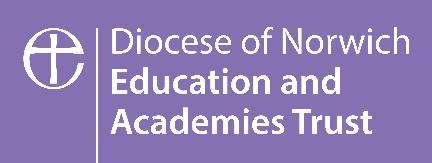
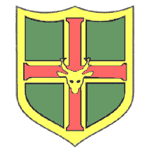
Dereham Church of England Junior Academy

Headteacher: Mrs Kelly Scott

Littlefields, Dereham, Norfolk NR19 1BJ

Tel: 01362 693876

Email: office@derehamjunior.dneat.org Web: www.derehamjunior.dneat.org

Data Collection and Parental Consents booklet September 2023

Please complete all sections of this booklet in full and return it to:

Dereham CofE Junior Academy

by no later than

Friday 26th May

Data Collection Form

**Pupil Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Legal Surname | | Legal Forename | Gender: Male / Female | |
| Please note | Original birth certificate may be requested to be seen | | | |
| Date of Birth |  | | | |
| Address |  | | | |
| Postcode |  | If the above address is a military camp, please confirm the camp name | |  |

**Parental Responsibility and Emergency Contacts** please provide the details of all persons with parental responsibility plus at least two emergency contacts numbering them in priority order in the event of an emergency.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Priority Order | Relationship to child | Has Parental  Responsibility  Yes / No | Title:  Mr, Mrs, etc | Forename | Surname | Address if different from child’s | |
|  |  |  |  |  |  |  | |
| Home No. | | Mobile No. | | Work No. | |
| email | | | | | | Post- code |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Priority Order | Relationship to child | Has Parental  Responsibility  Yes / No | Title:  Mr, Mrs, etc | Forename | Surname | Address if different from child’s | |
|  |  |  |  |  |  |  | |
| Home No. | | Mobile No. | | Work No. | |
| email | | | | | | Post- code |  |

**Parental Responsibility and Emergency Contacts continued…**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Priority Order | Relationship to child | Has Parental  Responsibility  Yes / No | Title:  Mr, Mrs, etc | Forename | Surname | Address if different from child’s | |
|  |  |  |  |  |  |  | |
| Home No. | | Mobile No. | | Work No. | |
| email | | | | | | Post- code |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Priority Order | Relationship to child | Has Parental  Responsibility  Yes / No | Title:  Mr, Mrs, etc | Forename | Surname | Address if different from child’s | |
|  |  |  |  |  |  |  | |
| Home No. | | Mobile No. | | Work No. | |
| email | | | | | | Post- code |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Priority Order | Relationship to child | Has Parental  Responsibility  Yes / No | Title:  Mr, Mrs, etc | Forename | Surname | Address if different from child’s | |
|  |  |  |  |  |  |  | |
| Home No. | | Mobile No. | | Work No. | |
| email | | | | | | Post- code |  |

|  |
| --- |
| If your child lives with different parents during the week or attends an afterschool nursery please provide the arrangements below; |
|  |

**Additional Family Information**

Please provide details of any other children currently living at your child’s home(s)

i.e brother, sister, half brother/sister, cousin etc.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Children’s Names | Date of Birth | Male or Female |  | Relationship to child. | School attending |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Previous School Details**

|  |  |
| --- | --- |
| School Name |  |
| School Address Details |  |
| School Phone Number |  |

If you have other school details please list these at the end of this document.

**Doctor, health care and other medical requirements**

|  |  |
| --- | --- |
| Name of Doctor & Surgery address | Surgery Number |
|  |  |
| NHS Number – can be found in child’s red book |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Has your child had a tetanus injection? | | Yes | No | If yes, date of tetanus |  |
| INHALER | Does your child use an inhaler? | Yes | No | If yes, what is the dosage? |  |
| If yes, what type of inhaler has been prescribed? | |  | | | |

|  |  |  |
| --- | --- | --- |
| **Other Medical information relevant to your child’s development and school e.g. hearing, sight, allergies, diabetes, epilepsy** | | |
|  | | |
| **Does your child have an Educational Health Care Plan?** | **Yes** | **No** |
| **Does your child have any dietary requirements, if so, please provide full details?** | | |

**How will your child normally get to and from school?**

|  |  |
| --- | --- |
| Walk |  |
| Car |  |
| Childcare |  | Please provide details; |

**Ethnicity and Religion**

Please tick the box that you believe best describes your child’s ethnicity:

|  |  |  |  |
| --- | --- | --- | --- |
| **White** | | **Chinese** | |
| British |  | Chinese |  |
| Irish |  | **Black or Black British** |  |
| Gypsy/Roma |  | Caribbean |  |
| Traveller of Irish Heritage |  | Angolan |  |
| Albanian |  | Congolese |  |
| Bosnian, Herzegovinian |  | Ghanaian |  |
| Croatian |  | Nigerian |  |
| Greek/Greek Cypriot |  | Sierra Leonean |  |
| Italian |  | Somali |  |
| Kosovan |  | Sudanese |  |
| Portuguese |  | Other Black African |  |
| Serbian |  | Any other black background |  |
| Turkish/Turkish Cypriot |  | **Other Ethnic groups** |  |
| Western European |  | Afghan |  |
| Eastern European |  | Arab Other |  |
| White Other |  | Egyptian |  |
| **Mixed** |  | Filipino |  |
| White and Black Caribbean |  | Iranian |  |
| White and Black African |  | Iraqi |  |
| White and Pakistani |  | Japanese |  |
| White and Indian |  | Korean |  |
| White and any other Asian background |  | Kurdish |  |
| Any other mixed background |  | Malay |  |
| **Asian and Asian British** |  | Moroccan |  |
| Indian |  | Thai |  |
| Pakistani |  | Vietnamese |  |
| Bangladeshi |  | **An ethnic group not listed here** |  |
| Any other Asian background |  | I do not wish to have this recorded |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Religion** |  | **What is the main language spoken at home?** |  |

|  |
| --- |
| **Service Child** (The school can only record what information the parent declares in this section) |
| Does your child have a parent (or parents) who is a current serving member of the regular HM Services, and is of Personal Marital Status Cat 1 or Cat 2? |
| Yes or No |

|  |  |  |  |
| --- | --- | --- | --- |
| The information you have given on this form will be held by the school. It will be shared with other departments in order to provide and plan services e.g. School Transport. It will be used to administer health, social and welfare care and will be shared with healthcare advisors, practitioners and other relevant agencies. It will be forwarded to your child’s new school if and when s/he changes school. It will also be used for statutory returns and for research purposes.  All information given will be held in the strictest confidence under the requirements of the Data Protection Act 1998.  I note the above statement and believe the information provided in this form to be correct as of this date. I will inform the school of any changes that may occur whilst my child attends the school. | | | |
| **Print Name**  **Parent/Carer** |  | **Date:** |  |
| **Signature**  **Parent/Carer** |  | **Date:** |  |

Additional information:

**Parental Consents**

**2023/24**

This document contains consent request information, please ensure all 9 consent sections are signed and dated before returning it to us.

**Child’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Medical Consent**

I agree that I will update the school with any changes in my child’s medical needs and ensure, where necessary, their medication is in school, in date and the appropriate form for the administration of medicine in school is completed.

The school can only give clearly labelled prescription medicines to children. Please see our administration of medicines policy on our website.

Please provide all medical information/medical conditions you feel that the school should be aware of: e.g. asthma, phobias, epilepsy, hyperventilation, diabetes, travel sickness, allergies etc on pages 3 and 4 of the data collection form.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Asthma**

N/A (my child does not have a diagnosis)

or

I can confirm that my child has been diagnosed with asthma and has been prescribed an inhaler which they will bring into school each day.

My child has a working, in-date inhaler, clearly labelled with their name, which they will either bring with them to school every day or arrangements made to keep one at school at all times.

Please note: In the event of your child displaying symptoms of asthma, and if their inhaler is not available or is unusable, please be aware that your child will receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Local Outings and School Trips (Level 1)**

Children will be taken on local visits by foot or mini-bus throughout the year and although parents will be notified in advance by either letter, text or the school's weekly bulletin, no specific consent will be requested.  For all other visits, specific parental consent will be required via Parentmail. Children may only be withdrawn from these visits on religious or medical grounds and it is parents’ responsibility to notify the school of their wish to do so on each occasion.  Please refer to our Educational Visits Policy for further information.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_

1. **Photography – Please delete as required all three photography consent sections**

1. **I give / do not give** *(please delete as appropriate)* consent for my child to be included in class photographs for individual and class photo’s via the Photography company photo’s.
2. **I give / do not give** *(please delete as appropriate)* consent for photographs of my child to be used for school publicity, e.g. the school's website, social media and local press.
3. **I give / do not give** *(please delete as appropriate)* consent for photographs of my child to be used for schoolwork and in other children’s exercise books.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Agreement for use of Child’s Work**

The school may produce web pages, ICT presentations, educational or interest articles for magazines or similar. No child’s work will be used without his/her permission but we also need permission from the parent/carer to be able to publish the child’s work. Please rest assured that the child’s safety will always be of paramount importance and no personal information will ever be made public. No names will be published alongside images unless there is specific reason to do so and on those occasions individual permission will be sought first.

**I give / do not give** *(please delete as appropriate)* consent for the school to publish my child’s work on the internet or elsewhere, subject to strict confidentiality of personal information.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form is valid from the date you sign it for a period of 5 years or for the time your child attends this school.

We will not re-use, in a new format, any photographs or recordings beyond a year of your child leaving this school. Historic photos or recordings may remain on our school / academy / trust website and displayed/used in school.

1. **APPENDIX 2**

**E-Safety and ICT Acceptable Use Agreement for Parents/Carers**

As the parent/carer of the above child(ren), I grant permission for my child(ren) to have access to use the Internet, the Virtual Learning Environment, academy email and other ICT facilities at Dereham Church of England Junior Academy.

I know that my daughter or son has signed a form to confirm that they will keep to the academy’s rules for responsible ICT use, outlined in the e-Safety and ICT Acceptable Use Rules for Children. I also understand that my son/daughter may be informed, if the rules have to be changed during the year. I know that the latest copy of the e-Safety and ICT Acceptable Use Policy and the Rules are available on the schools website [www.derehamjunior.dneat.org](http://www.derehamjunior.dneat.org) and that further advice about safe use of the Internet can be found through our links on the website.

I accept that, ultimately, the academy cannot be held responsible for the nature and content of materials accessed through the Internet and mobile technologies, but I understand that the academy will take every reasonable precaution to keep children safe and to prevent children from accessing inappropriate materials. These steps include using a filtered internet service, secure access to email, employing appropriate teaching practice and teaching e-Safety skills to children.

I understand that the academy can check my child’s computer files, and the Internet sites they visit. I also know that the academy may contact me if there are concerns about my son/daughter’s e-Safety or e-behaviour.

I will support the academy by promoting safe use of the Internet and digital technology at home

and will inform the academy if I have any concerns over my child’s e-Safety.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Take from our Trust e-safety and ICT Acceptable Use Policy Page **32** of **48)**

1. **APPENDIX 4**

**Acceptable use template for older students**

Digital technologies are an important part of the lives of children and young people, both within schools and outside school. These technologies are powerful tools, which open up new opportunities for everyone. Our pupils should have an entitlement to safe internet access at all times.

This Acceptable Use Agreement is intended to ensure:

* that our pupils will be responsible users and stay safe while using the internet and other digital technologies for educational, personal and recreational use
* that school systems and users are protected from accidental or deliberate misuse that could put the security of the systems in danger. The school will have good access to digital technologies to enhance their learning and, in return, expect the pupils to agree to be responsible users.

**Please read this with your son/daughter and explain what this means in terms of being safe when using digital technologies and the internet in school.**

**Acceptable Use Policy Agreement**

I understand that I must use school systems in a responsible way, to ensure that there is no risk to my safety or to the safety and security of the systems and other users.

For my own personal safety:

* I understand that the school will check my use of the systems and devices
* I will keep my username and password safe and secure and I will not share it. I will not try to use any other person’s username and password. I understand that I should not write down or store a password where it is possible that someone may steal it
* I will be aware of “stranger danger”, when I am on-line
* I will not share personal information about myself or others when on-line (this could include names, addresses, email addresses, telephone numbers, age, gender, etc)
* If I arrange to meet people off-line that I have communicated with on-line, I will do so in a public place and take an adult with me
* I will immediately tell my teacher if I see any unpleasant or inappropriate material or messages or anything that makes me feel uncomfortable when on-line.

I understand that everyone has equal rights to use technology as a resource and:

* I understand that the school systems and devices are meant to be for learning and that I will not use them for other things like gaming unless I have permission
* I will not make large downloads or uploads that might take up too much ‘space’ and mean that other children can’t use the system
* I will not use the academy systems or devices for on-line gaming, shopping, file sharing or video broadcasting (eg YouTube), unless I have permission of a member of staff to do so.

I will act as I expect others to act toward me:

* I will respect other people’s work and property and will not look at it or use it without permission
* I will be polite and responsible when I communicate with others. I will not use strong, aggressive or unkind language and I appreciate that others may have different opinions
* I will not take or share images of anyone without their permission

* I recognise that the school has to make sure that everything I use works really well, so I have to help with this by using things carefully
* I will not use my mobile phone or my own other devices on school property
* I understand the risks and will not try to look at any materials which are illegal or inappropriate or may cause harm or distress to others
* I will not try to use any programmes or software that will help me to bypass the filtering/security systems in place
* I will immediately report any damage or faults involving equipment or software, however this may have happened, to a teacher
* I will not open any hyperlinks in emails or any attachments to emails, unless the teacher says I can
* I will not install or attempt to install or store programmes of any type on any school device, nor will I try to alter computer settings
* I will not use social media sites unless I am given permission and am with a member of staff.

When using the internet for research or recreation, I know that:

* I should ensure that I have permission to use the original work of others in my own work
* Where work is protected by copyright, I will not try to download copies (including music and videos). My teacher will remind me of this
* When I am using the internet to find information, I should take care to check that the information that I look at is accurate, as I understand that the work of others may not be truthful and may be a deliberate attempt to mislead me.

I understand that I am responsible for my actions, both in and out of school:

* I understand that the school also has the right to take action against me if I do any of the things I shouldn’t do that are listed above. This includes when I am out of school and include things like cyber-bullying, use of images or personal information of other people in school
* I understand that if I don’t stick to this agreement, there will be consequences. This may include contacting parents; not being allowed to use technology in school or even contacting the police.

Parents/carers, can you please complete the sections on the next page to show that you have discussed, read, understood and agree to the rules included in the Acceptable Use Agreement. If you do not sign and return this agreement, access will not be granted to school systems and devices.

1. **Pupil Acceptable Use Agreement Form**

This form relates to the pupil Acceptable Use Agreement, to which it is attached.

After discussing the AUA with your child/ren, please complete the sections below to show that you have read, discussed, understood and agree to the rules included in the Acceptable Use Agreement.

If you do not sign and return this agreement, access will not be granted to school systems.

I have read and understand the above and agree to follow these guidelines when:

* I use the school systems and devices (both in and out of school)
* I use my own devices in the school (if allowed) e.g. mobile phones, gaming devices, USB devices, cameras etc
* I use my own equipment out of the school in a way that is related to me being a member of this school eg communicating with other members of the school, accessing school email, website etc.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Swimming Lessons**

During your child’s time at Dereham Junior Academy, there will be an opportunity for your child to take part in swimming lessons. These will be on a rota system and currently our year 4 children take part in these sessions over the year. The rota is necessary to comply with transport safety regulations.

The swimming lessons are held at Dereham Leisure Centre. Further details of your child’s swimming sessions will be provided nearer the time.

Swimming lessons are part of the school curriculum with no cost to parents.

The following guidelines apply for swimming lessons:-

* Swimming is an important part of our physical education and ‘safety’ provision
* A child will only be allowed to miss swimming if there are genuine medical reasons
* No jewellery (including earrings or studs) or tattoo transfers are allowed to be worn
* Children are expected to follow instructions from staff and behave appropriately.

Below is an outline of how we will stay safe so we are able to have a brilliant time swimming:

* On the day your child is swimming, they will need to bring a named swimming costume and towel in a suitable plastic/swimming bag
* We will only take one class swimming at a time so there is no mixing of bubbles
* Teachers and TAs will accompany your child’s class on a bus provided by Dereham Coachways which will transport them to and from the swimming pool
* The swimming session will be run by staff from school and two instructors at the pool
* Once the session is over, your child will take their bag from the rack and get dried and changed in the changing rooms

Although members of the public will still be using the leisure centre, we have looked at their risk assessment and procedures and are completely satisfied that our own very high standards will be maintained while they are offsite.

1. **Swimming Lessons**

I understand that my child will have swimming lessons as part of the national curriculum and consent to my child participating.

Please tick the correct box below if any of the below apply.

My child has no medical condition preventing participation but the instructor should be informed of the following medical condition (i.e. Asthma, Epilepsy, Diabetes)

My Child has a medical condition preventing participation and I enclose a doctor’s note.

I fully understand and accept that, while the supervisory adults in charge of the group will take all reasonable care of the children, they cannot necessarily be held liable in respect of loss or damage to property or injury suffered by my child arising out of the educational visit/journey, unless such loss, damage or injury results from the negligence of our staff or official volunteers.

I agree to my child (named on page one) receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical professionals present.

I understand the extent and limitation of the insurance cover provided.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Home School Agreement**

We believe all children have the right to thrive, in all aspects of their life, within a safe and caring Christian Environment. We aim to provide the children in the school with the necessary skills, tools and experiences to ensure they achieve outstanding performance.

By the time children go to high school we want them to:

* Be confident, happy and able to cope with the ups and downs of life and be able to relate positively to others
* Be learning, achieving and contributing to their world, recognising their own achievements and aspiring to success
* Have the best possible health and development and be able to start making choices about a healthy lifestyle
* Be and feel safe and be increasingly able to make decisions about risk

**The School agrees:**

* To provide a safe, happy and nurturing learning environment
* To promote positive behaviours and relationships amongst pupils
* To encourage and reward all aspects of pupil achievement
* To provide a stimulating and exciting curriculum that aims to excite and engage all
* To enable pupils to engage with technology within an e-safe environment
* To provide a range of extra-curricular activities and sporting opportunities
* To keep parents and carers informed on all relevant school matters, and all aspects of their child’s behaviour, attendance and progress
* To be a welcoming and open environment for parents, carers and visitors, and to take an active role in the local and wider community

**The Home agrees to support the school by:**

* Working collaboratively to promote the school in a positive light
* Ensuring that children attend regularly, on time, and properly equipped
* Attending open evenings to discuss pupils work and progress
* Informing us of any pupil absence by 8.50am
* Informing us of any issue which may affect the child’s work or behaviour
* Promoting our policy on behaviour
* Avoiding booking holidays during term-time
* Assisting children with homework and with reading
* **The Pupil agrees to:**
* Attend school regularly and on time, and bring all the equipment they need for the day
* Work hard, complete class work and homework, and take pride in what they do
* Wear the school uniform and be tidy in appearance
* Show respect; be polite, caring and considerate of everyone in the school community
* Be respectful of their personal property and the belongings of others including the school’s equipment and resources
* Positively represent the school when on trips or attending external events or sporting fixtures

**Home School Agreement**

I confirm that I have read and understood the Home School Agreement and agree to support the school and adhere to the school’s policies (which can be found on the website).

Parent/Carer's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   (Please print)

Parent/Carer's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for reading through this school consents document.

Please make sure all consents are:

* Signed
* Dated
* Returned to Dereham CofE Junior Academy, by no later than

**Friday 26th May 2023.**