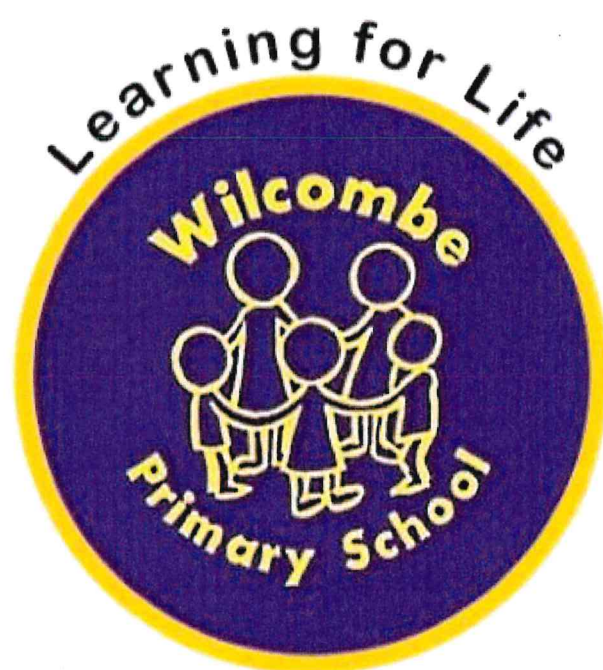


Wilcombe Primary School



New Pupil Pack

****(Please complete and return enclosed Forms)****



Wilcombe Primary School
Lazenby Road, Tiverton,
Devon EX16 4AL
T: 01884 253025
E: wilcombe@ventrus.org.uk
W: wilcombe-pri.devon.sch.uk

Our 2022-2023 Term Dates

School Name (s)	Wilcombe Primary School														
DfE number (s)	878/2722														
Contact name	REG GILBERT														
Date submitted															
	Sep-2022					Oct-2022					Nov-2022				
Monday		N	12	19	26	3	10	17	24	31		7	14	21	28
Tuesday		N	13	20	27	4	11	18	25		1	8	15	22	29
Wednesday			7	14	21	28	5	12	19	26	2	9	16	23	30
Thursday	O		8	15	22	29	6	13	20	27	3	10	17	24	
Friday	O		9	16	23	30	7	14	N	28	4	11	18	25	
Saturday	3	10	17	24	1	8	15	22	29		5	12	19	26	
Sunday	4	11	18	25	2	9	16	23	30		6	13	20	27	
	Dec-2022					Jan-2023					Feb-2023				
Monday		5	12	19	26	2	9	16	23	30		6	13	20	27
Tuesday		6	13	20	27	3	10	17	24	31		7	14	21	28
Wednesday		7	14	21	28	4	11	18	25		1	8	15	22	
Thursday	1	8	15	22	29	5	12	19	26		2	9	16	23	
Friday	2	9	16	23	30	6	13	20	27		3	10	17	24	
Saturday	3	10	17	24	31	7	14	21	28		4	11	18	25	
Sunday	4	11	18	25	1	8	15	22	29	33	5	12	19	26	
	Mar-2023					Apr-2023					May-2023				
Monday		6	13	20	27		3	10	17	24	1	8	15	22	29
Tuesday		7	14	21	28		4	11	18	25	2	9	16	23	30
Wednesday	1	8	15	22	29		5	12	19	26	3	10	17	24	31
Thursday	2	9	16	23	30		6	13	20	27	4	11	18	25	
Friday	3	10	17	24	31		7	14	21	28	5	12	19	26	
Saturday	4	11	18	25		1	8	15	22	29	6	13	20	27	
Sunday	5	12	19	26		2	9	16	23	30	7	14	21	28	
	Jun-2023					Jul-2023					Aug-2023				
Monday		5	12	19	26	3	10	17	N	31		7	14	21	28
Tuesday		6	13	20	27	4	11	18	N		1	8	15	22	29
Wednesday		7	14	21	28	5	12	19	26		2	9	16	23	30
Thursday	1	8	15	22	29	6	13	20	27		3	10	17	24	31
Friday	2	9	16	23	30	7	14	21	28		4	11	18	25	
Saturday	3	10	17	24	1	8	15	22	29		5	12	19	26	
Sunday	4	11	18	25	2	9	16	23	30		6	13	20	27	
key:	days within Devon's school terms					days outside Devon's school terms					Bank Holidays and weekends				

All of our policies are available on the Wilcombe Primary School website
<http://www.wilcombe-pri.devon.sch.uk/parents/policies/>



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September 2022

Dear Parent,

School Uniform Ordering Information.

School uniform can be ordered online from School Trends or My Clothing by following either of the links below:

<https://www.schooltrendsonline.com/uniform/WilcombePrimarySchoolEX164AL>

<https://myclothing.com/wilcombe-primary-school/10473.school>

You can either pay online or if you prefer for School Trends, you can order online and send a cheque to:

School Trends
10 Carley Drive
Westfield
Sheffield S20 8NQ

There are no minimum order quantities and your uniform will be delivered directly to your chosen address. As well as our approved decorated school uniform, you are also able to order plain items such as trousers, skirts and shirts.

Other ordering information including sizes, delivery information and the returns procedure is also available online.

Yours sincerely,

Wilcombe Admin Team



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September 2022

Dear Parents

Re: Attendance / Absence

Regular attendance is extremely important as missing school can have an impact on learning, and as I am sure you are aware it is a legal requirement. Good attendance enables students to keep up with the work required. All children's attendance is monitored throughout the year.

As a parent it is your legal responsibility, as stated under Section 444 of the Education Act 1996, to ensure that your child attends the school at which he/she is registered, regularly and punctually. It is vital that if your child is absent from school for any reason that we are informed. If we are not informed on the day and provided with a valid reason for absence, it will be recorded as unauthorised.

We have a legal duty to inform Devon County Council of unauthorised absences which may result in penalty notices being issued. These can be issued for all unauthorised absences and persistent lateness - not just when holidays are taken.

We would also like to remind parents that medical evidence may be requested if excessive absence due to illness is recorded. I.e. Appointment cards/letters or sight of medication if prescribed antibiotics etc.

Please see the notes below.

NOTES TO PARENTS/CARERS:

The law does not grant parents/carers an automatic right to take their children out of school during term time. If the request is for an absence in term time you must have Parental Responsibility and be the parent/carer with whom the child normally lives. Permission must be sought in advance. If the circumstances relating to this request are considered exceptional and the absence is authorised by the school, the authorising of the absences will be conditional on the child(ren) attending satisfactory up to the date covered by this request.

WARNING TO PARENTS:

If the school refuses your request and the child is still taken out of school, this will be recorded as an unauthorised absence. If the school are unable to authorise this absence this may result in legal action, it could be a Penalty notice or summons to court proceedings which can result in a fine of up to £2,500 and/or a term of imprisonment of up to 3 months.



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Parents should note that in normal circumstances, current practice is that only one penalty notice will be issued to a parent relating to the absence of a particular child within a two-year period. Should a further period of unauthorised absence be recorded, then the parent(s) will normally be summonsed to appear at a Magistrates Court, unless an Education Supervision Order is considered more appropriate.

Some examples of reasons for authorised / unauthorised absences are listed below.

<p>Unavoidable absence from school will be authorised if it is for the following reasons:</p> <ul style="list-style-type: none">▪ Genuine illness▪ Unavoidable medical / dental appointments (but try to make these after school if at all possible)▪ Days of religious observance▪ Seeing a parent who is on leave from the armed forces▪ External examinations▪ When Traveller children go on the road with their parents	<p>Other examples of absence from school that will not be authorised:</p> <ul style="list-style-type: none">▪ Any type of shopping▪ Looking after siblings or unwell parents▪ Minding the house▪ Birthdays▪ Resting after a late night▪ Relatives visiting or visiting relatives
--	---

If you have any questions, please don't hesitate to contact the school office.

Kind regards

Reg Gilbert
Headteacher



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Dear Parent and Carers,

RE: Wilcombe 'Nut Free School' policy

This letter is to inform you that Wilcombe Primary School is a **'NUT FREE SCHOOL'**.

We have a pupil in our school that has a **severe** food allergy to peanuts/nuts. Any exposure to peanuts/nuts may cause a life-threatening allergic reaction that requires emergency medical treatment.

To reduce the chance of this occurring, we are asking that you do not send any peanut or nut containing products to school with your child. We are aware many packages state 'may contain nuts' we have been advised that these products are ok if nuts are not in the ingredients. This statement is more likely to mean that the product was made in the same factory as nut based items. We would also ask that if your child has eaten peanuts/nuts before coming to school, please be sure your child's hands and face have been thoroughly washed before entering the school.

We have hand gel dispensers placed around the school for everyone to use.

All of the school's policies are available on our website;
<http://www.wilcombe-pri.devon.sch.uk/parents/policies/>

Your understanding and support in helping us to provide a 'NUT FREE SCHOOL' and a safe learning environment for all children is greatly appreciated.

Kind Regards

Mr Reg Gilbert
Headteacher



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Pupil Permissions

PLEASE ENSURE YOU COMPLETE THE ONLINE FORM (link below)

https://forms.office.com/Pages/ResponsePage.aspx?id=3RWFZvuneEGMNLPLdk_cCkopHLg7TxBia1o7IviRNBUMTM0Rkk1TIRCUUVORkhVSVdaTFdVOFU4Wi4u

One form needs to be completed for each child and only needs to be completed once in the academic year.

It is extremely important that we have the correct information recorded should we need to contact you for any reason and specifically should an emergency arise. We would therefore ask that once the form is completed and returned, we are kept informed of any changes throughout the year.

Medicines – If your child has ongoing medication in school for any reason, please complete the attached medical form. This is required for inhalers that are kept in classes.

Thanking you in advance for your co-operation,

Wilcombe Admin Team



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(Please return to the office)

PARENTAL AGREEMENT TO ADMINISTER PRESCRIPTION MEDICINE
Wilcombe Primary School

Notes to Parent/Guardian:

1. This school will only give your child medicine after you have completed and signed this form
2. All medicines must be in the original container as dispensed by the pharmacy, with the child's name, its contents, the dosage and prescribing doctor's name.
3. The information is requested, in confidence, to ensure that the school is fully aware of the medical needs of your child

Prescribed Medication:

Date	
Child's name	
Date of birth	
Class	
Reason for medication	

Name/type of medicine (as described on the container)	
Expiry date of medication	
How much to give (i.e. dose to be given)	
Time(s) of medication to be given	
Special precautions/other instructions (e.g. to be taken with/before/after food)	
Are there any side effects that the school needs to know about?	
Procedures to take in an emergency	



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I understand that I must deliver the medicine personally to the office	
Number of tablets/quantity to be given	
Time limit – please specify how long your child needs to be taking the medication	_____ day/s _____ weeks
I give permission for my child to carry their own asthma inhalers	Yes / No / Not applicable
I give permission for my child to carry their own asthma inhaler and manage its use	Yes / No / Not applicable

Details of Person Completing the Form:

Name of parent/guardian	
Relationship to child	
Daytime telephone number	
Alternative contact details in the event of an emergency	
Name and phone number of GP	

I confirm that the medicine detailed overleaf has been prescribed by a doctor, and that I give my permission for the Headteacher (or his nominee) to administer the medicine to my child during the time he/she is at Wilcombe Primary School.

I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. I also agree that I am responsible for collecting any unused or out of date supplies and that I will dispose of the supplies.

The above information is, to the best of my knowledge, accurate at the time of writing.

Parent's Signature _____ Date _____
(Parent/Guardian/person with parental responsibility)



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Wilcombe Primary School Admissions Checklist

I have **read and understood** the following:

- ☐ Information regarding Attendance/Absence dated September 2022.
- ☐ Information to make me aware you are a 'Nut Free' School.
- ☐ I have completed the online pupil permission form (Link within this form)
- ☐ Home School Agreement
- ☐ Administration of Medicine form

I am **returning/providing**:

- ☐ S1/11 Data Collection Form completed
- ☐ Copy of pupils Birth Certificate

S11/1 Data Collection on Admission to School: Pupil Information

This form is for completion by the Parent/Guardian of every child **once** they have been given a place at the school.

Parents/Guardians must also complete S11/2 giving **your** contact details as well as information on people to be contacted in the event of an emergency.

Please provide as much of the following information as you can. If you need help in completing the form, please ask the School Administrator/Secretary/Bursar. The grey shaded areas are for the school's use. Please return your completed form to the school.

School

1 Pupil's basic details

Legal surname* Legal forename

Gender ☐ Male ☐ Female Date of Birth Middle names(s)

Preferred surname* (If different) Preferred forename (if different)

* please see note under 'General Principles for Schools' on the S11/2 Contacts Information Form

For schools use only

Birth certificate seen? ☐ Please tick if you have seen the child's Birth Certificate or any other legal document e.g. Deed Poll, specifying the **Legal** surname of the child.

Admission date Admission no. UPN

2 Pupil's address

Address

Postcode

3 Pupil's medical details

Emergency consent? e.g. the school has permission to give/arrange emergency treatment ☐ Yes ☐ No

Dietary needs: please tick any that apply

- | | | |
|--|--|--|
| <input type="checkbox"/> Artificial colouring allergy | <input type="checkbox"/> Kosher foods only | <input type="checkbox"/> No pork |
| <input type="checkbox"/> Gluten free | <input type="checkbox"/> No dairy produce | <input type="checkbox"/> Seafood allergy |
| <input type="checkbox"/> Halal | <input type="checkbox"/> No nuts of any type or quantity | <input type="checkbox"/> Vegetarian |
| <input type="checkbox"/> Other (please specify) <input type="text"/> | | |

Medical practice

Doctor's name Surgery name

Surgery address
Tel no:

Other medical information
e.g. asthma, diabetes

4 Ethnicity / religion / first language / nationality details

Ethnicity*

Ethnic information was provided by: ☐ Parent ☐ Pupil

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture and ancestry or family history. **Ethnic background is not the same as nationality or country of birth.** The Information Commissioner recommends that young people aged 11 years old or above have the opportunity to decide their own ethnic identity. Parents, or those with parental responsibility, are asked to support or advise those children aged over 11 in making this decision wherever necessary.

Please tick one box only

White

- ☐ British
☐ Irish
☐ Traveller of Irish Heritage
☐ Gypsy/Roma
☐ Greek/Greek Cypriot
☐ Turkish/Turkish Cypriot
☐ Western European ¹
☐ Eastern European ²
☐ Other ³

Chinese

- ☐ Hong Kong Chinese
☐ Other Chinese ⁴
Black or Black British
☐ Caribbean
☐ African
☐ Any other Black background

Any other ethnic background

- ☐ Afghan
☐ Arab ⁵
☐ Filipino
☐ Iranian
☐ Japanese
☐ Malay ⁶
☐ Thai
☐ Any other Ethnic group ⁷

Mixed

- ☐ White & Black Caribbean
☐ White & Black African
☐ White & Asian
☐ Any other mixed background

Asian or Asian British

- ☐ Indian
☐ Pakistani
☐ Bangladeshi
☐ Any other Asian background

- ☐ I do not wish an ethnic background to be recorded

Notes:

1 Western European includes: Italian, French, German, Spanish, Portuguese and Scandinavian

2 Eastern European inc: Russian, Latvian, Ukrainian, Polish, Bulgarian, Czech, Slovak, Lithuanian, Montenegrin and Romanian.

3 Other White Background includes: any white category not previously mentioned e.g. Albanian, Australian, Bosnian-Herzegovinian, Canadian, Croatian, Kosovan, New Zealander, North American, Serbian/Yugoslavian.

4 Other Chinese includes: Mainland Chinese, Malaysian Chinese, Singaporean Chinese, Taiwanese, any other non-Hong Kong Chinese.

5 Arab includes: Palestinian, Kuwaiti, Jordanian and Saudi Arabian.

6 Malay includes Malaysian other than Malaysian Chinese (see Note 4).

7 Any other ethnic group includes any ethnic group not previously mentioned e.g. Egyptian, Iraqi, Korean, Kurdish (inc. Kurdish pupils from Iraq, Iran and Turkey), Latin/South/ Central American (inc. Cuban and Belizean), Lebanese, Libyan, Moroccan, Polynesian (inc. Fijian, Tongan, Samoan & Tahitian), Vietnamese, Yemeni.

Religious affiliation: please tick one box only

- ☐ Baha'i ☐ Christian ☐ Jewish ☐ Sikh ☐ No religion
☐ Buddhist ☐ Hindu ☐ Muslim ☐ Other* ☐ Decline to answer

* Please specify

Pupil's first language¹ What was the first language your child understood/spoke?

- ☐ English ☐ Other, please specify ☐ Decline to provide

Asylum status (please tick if either of the following apply) ☐ this pupil is seeking asylum ☐ this pupil is a refugee

¹ The Department for Education advise that this information will help them understand a range of factors, allowing them to better plan to meet needs within the school system.

Meals

Please tick to indicate which of the following your child is most likely to have:

- ☐ Free school meal ☐ Home ☐ Sandwiches ☐ School meal

Note: it is important that parents of Foundation / Key Stage 1 pupils apply for free school meals. For information on how to apply please visit <https://www.devon.gov.uk/educationandfamilies/school-information/school-meals>

Mode of travel

Please tick to indicate which of the following your child is most likely to use to get to school:

- ☐ Bicycle ☐ Car share ¹ ☐ Dedicated school bus ² ☐ Taxi ☐ Walk
☐ Car/van ☐ Public service bus ² ☐ Bus (type not known) ² ☐ Train ☐ Other

¹with child/children from a different household

² Route (if known)

Service child

Does this child have a parent(s) in regular HM Forces military units?
 (applies to children whose parents are Pstat Cat1 or Pstat Cat2)

- ☐ Yes ☐ No

For further information please see 'MOD personnel categories definition' in the Additional Guidance section of our website at <https://www.devon.gov.uk/supportforschools/administration/school-census>

Recoupment

The following information is required so that the Local Authority can recover the cost of educating children who are not its responsibility, mainly because the child's normal place of residence falls within a different Local Authority.

Please tick the appropriate box if you pay Council tax to one of the following Councils:

- ☐ Cornwall ☐ Plymouth ☐ Torbay
☐ Dorset ☐ Somerset ☐ Other (ie, not Devon or one of the others listed)

Linked agencies

It is important that all the agencies who are working with a child work together to ensure better outcomes for that child. In order to do that, please identify any other agencies working with your child, for example Social Care (i.e. Social Services)*, Youth Offending Team, Child and Adolescent Mental Health Services. Please list any agencies below:

* If you indicated above that Social Care (Social Services) are involved in the care of your child, please tick if this child is 'In Care' (sometimes known as being 'Looked After') and state which Local Government Authority is responsible for this child, e.g. Devon, Torbay etc below.

- ☐ Child in care Local Authority responsible for child:

Special Education Needs

Please tick if this child has Special Educational Needs (i.e. has a Statement for Special Education Needs or an Education and Health Care Plan (EHCP) or is currently being assessed).

☐

Previous school

Please provide details of the last school attended (includes Nursery Schools/Units or Pre-Schools/Playgroups)

School name			
School address (if known)			
School tel no. (if known)			
Date of arrival at previous school *		Date of leaving previous school *	
*an approximate date would be helpful if the exact date is not known e.g. September 2017			
Reason for leaving, e.g. moved house, normal school transfer age			

Siblings please give details of any other children in your family with their dates of birth.

Forename(s)	Surname	Date of birth

6 Parent signature

Your signature		Date	
----------------	--	------	--

Please complete form S11/2 Data Collection on Admission to School – Contacts

7 What we (the school) does with the information you have provided on this form (GDPR)

The information you provide on this form will be used to register your child with our school and to help us build a picture of your child's educational, social and health needs, so we can support them accordingly.

Further information about how we handle personal information and your rights is available in our Data Protection Privacy Notice (For Parents and Carers) which can be found on our website at <https://www.ventrus.org.uk/our-people/policies/>

8 What the Local Authority does with some of the information in this form

Devon County Council uses information about children and young people to enable it to carry out specific functions for which it is responsible. The Council also uses this personal data to derive statistics which inform decisions it makes (e.g.) regarding the funding of schools, assess their performance and to set targets for them. These statistics are used in such a way that individual children cannot be identified.

Further information on how the Local Authority uses your data is available in "What the LA does with your data" guide <https://www.devon.gov.uk/supportforschools/administration/information-governance/privacy-notices>

S11/2 Data collection on admission to school: contacts information

1

Pupil's basic details

Name of child contact details are for

UPN (for schools use only)

Please give details of everyone who has parental responsibility (see Note of page 6) and anyone else to be contacted in an emergency. Please give details of parents/guardians first but give a low number in the "contact priority" box for any other people who should be contacted in an emergency. (Contact priority 1, i.e. the first person to contact in an emergency, contact priority 2, i.e. the second person to contact in an emergency, etc).

2

Your details

Surname

Forename(s)

Gender

☐

Male

☐

Female

Title (eg, Mr, Mrs, Miss, Ms, Dr, Rev)

Relationship to child - please tick to indicate which of the following applies:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Social worker | <input type="checkbox"/> Foster mother | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> Father | <input type="checkbox"/> Religious/spiritual contact | <input type="checkbox"/> Headteacher | <input type="checkbox"/> Doctor |
| <input type="checkbox"/> Other family member | <input type="checkbox"/> Childminder | <input type="checkbox"/> Step father | <input type="checkbox"/> Carer |
| <input type="checkbox"/> Other relative | <input type="checkbox"/> Foster father | <input type="checkbox"/> Step mother | <input type="checkbox"/> Other contact |
| <input type="checkbox"/> Self (if you are completing this form on your own behalf, being of legal age) | | | |

Does this person have 'parental responsibility'? (see end of document for guidance)

☐ Yes

☐ No

Is there a Court Order relating to this child?

☐ Yes

☐ No

Contact priority (1 - 5) where 1 is the first person to contact in an emergency, 2 is the second person to contact, etc

Telephone numbers(s)

(with STD numbers where appropriate)

please tick if this is
a daytime number

Notes

Home

☐

Work

☐

Mobile

☐

Other

☐

Email

Home

Work

Address (if different from the address given for the child)

If English is not your first language please state what is (this may include British Sign Language)

Do you need a translator / signer?

☐ Yes

☐ No

Place of work

3.1

Parent / contact

Surname

Forename(s)

Gender

☐

Male

☐

Female

Title (eg, Mr, Mrs, Miss, Ms, Dr,Rev)

Relationship to child - please tick to indicate which of the following applies:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Social worker | <input type="checkbox"/> Foster mother | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> Father | <input type="checkbox"/> Religious/spiritual contact | <input type="checkbox"/> Headteacher | <input type="checkbox"/> Doctor |
| <input type="checkbox"/> Other family member | <input type="checkbox"/> Childminder | <input type="checkbox"/> Step father | <input type="checkbox"/> Carer |
| <input type="checkbox"/> Other relative | <input type="checkbox"/> Foster father | <input type="checkbox"/> Step mother | <input type="checkbox"/> Other contact |
| <input type="checkbox"/> Self (if you are completing this form on your own behalf, being of legal age) | | | |

Does this person have 'parental responsibility'? (see end of document for guidance)

☐ Yes

☐ No

Is there a Court Order relating to this child?

☐ Yes

☐ No

Contact priority (1 - 5) where 1 is the first person to contact in an emergency, 2 is the second person to contact, etc

Telephone numbers(s)

(with STD numbers where appropriate)

please tick if this is a daytime number

Notes

Home

☐

Work

☐

Mobile

☐

Other

☐

Email

Home

Work

Address (if different from the address given for the child)

If English is not your first language please state what is (this may include British Sign Language)

Do you need a translator / signer?

☐ Yes

☐ No

Place of work

3.2 Parent / contact

Surname Forename(s)

Gender ☐ Male ☐ Female Title (eg, Mr, Mrs, Miss, Ms, Dr, Rev)

Relationship to child - please tick to indicate which of the following applies:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Social worker | <input type="checkbox"/> Foster mother | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> Father | <input type="checkbox"/> Religious/spiritual contact | <input type="checkbox"/> Headteacher | <input type="checkbox"/> Doctor |
| <input type="checkbox"/> Other family member | <input type="checkbox"/> Childminder | <input type="checkbox"/> Step father | <input type="checkbox"/> Carer |
| <input type="checkbox"/> Other relative | <input type="checkbox"/> Foster father | <input type="checkbox"/> Step mother | <input type="checkbox"/> Other contact |
| <input type="checkbox"/> Self (if you are completing this form on your own behalf, being of legal age) | | | |

Does this person have 'parental responsibility'? (see end of document for guidance) ☐ Yes ☐ No

Is there a Court Order relating to this child? ☐ Yes ☐ No

Contact priority (1 - 5) where 1 is the first person to contact in an emergency, 2 is the second person to contact, etc

Telephone numbers(s) (with STD numbers where appropriate)	please tick if this is a daytime number	Notes
Home <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Work <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Mobile <input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Other <input type="text"/>	<input type="checkbox"/>	<input type="text"/>

Email

Home

Work

Address (if different from the address given for the child)

If English is not your first language please state what is (this may include British Sign Language)

Do you need a translator / signer? ☐ Yes ☐ No

Place of work

3.3

Parent / contact

Surname

Forename(s)

Gender

☐

Male

☐

Female

Title (eg, Mr, Mrs, Miss, Ms, Dr, Rev)

Relationship to child - please tick to indicate which of the following applies:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Social worker | <input type="checkbox"/> Foster mother | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> Father | <input type="checkbox"/> Religious/spiritual contact | <input type="checkbox"/> Headteacher | <input type="checkbox"/> Doctor |
| <input type="checkbox"/> Other family member | <input type="checkbox"/> Childminder | <input type="checkbox"/> Step father | <input type="checkbox"/> Carer |
| <input type="checkbox"/> Other relative | <input type="checkbox"/> Foster father | <input type="checkbox"/> Step mother | <input type="checkbox"/> Other contact |
| <input type="checkbox"/> Self (if you are completing this form on your own behalf, being of legal age) | | | |

Does this person have 'parental responsibility'? (see end of document for guidance)

☐ Yes

☐ No

Is there a Court Order relating to this child?

☐ Yes

☐ No

Contact priority (1 - 5) where 1 is the first person to contact in an emergency, 2 is the second person to contact, etc

Telephone numbers(s)

(with STD numbers where appropriate)

please tick if this is
a daytime number

Notes

Home

☐

Work

☐

Mobile

☐

Other

☐

Email

Home

Work

Address (if different from the address given for the child)

If English is not your first language please state
what is (this may include British Sign Language)

Do you need a translator / signer?

☐ Yes

☐ No

Place of work

3.4

Parent / contact

Surname

Forename(s)

Gender

☐

Male

☐

Female

Title (eg, Mr, Mrs, Miss, Ms, Dr, Rev)

Relationship to child - please tick to indicate which of the following applies:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Social worker | <input type="checkbox"/> Foster mother | <input type="checkbox"/> Teacher |
| <input type="checkbox"/> Father | <input type="checkbox"/> Religious/spiritual contact | <input type="checkbox"/> Headteacher | <input type="checkbox"/> Doctor |
| <input type="checkbox"/> Other family member | <input type="checkbox"/> Childminder | <input type="checkbox"/> Step father | <input type="checkbox"/> Carer |
| <input type="checkbox"/> Other relative | <input type="checkbox"/> Foster father | <input type="checkbox"/> Step mother | <input type="checkbox"/> Other contact |
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Does this person have 'parental responsibility'? (see end of document for guidance)

☐ Yes

☐ No

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☐ Yes

☐ No

Contact priority (1 - 5) where 1 is the first person to contact in an emergency, 2 is the second person to contact, etc

Telephone numbers(s)

(with STD numbers where appropriate)

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a daytime number

Notes

Home

☐

Work

☐

Mobile

☐

Other

☐

Email

Home

Work

Address (if different from the address given for the child)

If English is not your first language please state what is (this may include British Sign Language)

Do you need a translator / signer?

☐ Yes

☐ No

Place of work

What is parental responsibility?

Parental responsibility means assuming all the rights, duties, powers, responsibilities and authority that a parent of a child has by law. A person with parental responsibility for a child has the right to make important decisions about their upbringing, for example,

- where they live
- what medical treatment the child should receive
- what education they receive, including which school they should attend

Who has parental responsibility?

Mothers and married fathers automatically have parental responsibility and will not lose it if they later get divorced. Unmarried fathers do not automatically have parental responsibility. An unmarried father can get parental responsibility by:

- jointly registering the birth of the child with the mother (from 1 December 2003)
- getting a parental responsibility agreement with the mother
- getting a parental responsibility order from a court

People other than a child's natural parents can acquire parental responsibility through;

- Being granted a residence order or a child arrangement order (from 2014)
- Being appointed a guardian (by a court or by the mother or other guardian)
- Being named in an emergency protection order (although parental responsibility in such a case is limited to taking reasonable steps to safeguard or promote the child's welfare)
- Adopting a child

In addition, a Local Authority can acquire parental responsibility if it is named in the care order for a child

For further information please see: <https://www.gov.uk/parental-rights-responsibilities/who-has-parental-responsibility>

Everyone who is a parent, whether they are a resident or non-resident parent, has the same right to participate in decisions about a child's education and receive information about the child.

School staff must treat all parents equally, unless there is a court order limiting an individual's exercise of parental responsibility. Individuals who have parental responsibility for, or care of, a child have the same rights as natural parents, for example:

To receive information e.g. pupil reports

To participate in activities e.g. vote in elections for parent governors

To be asked to give consent e.g. to the child taking part in school trips

To be informed about meetings involving the child, e.g. a governors' meeting on the child's exclusion

We have received the following advice from the County Solicitor's office concerning pupil surnames:

Where only one person holds parental responsibility for a child, he or she has the legal right to effect a change of the child's surname without any permission or consent.

Where more than one person has parental responsibility for a child, the surname of a child can only be changed with the consent or agreement of all those having parental responsibility for a child.

Where two or more people have parental responsibility for a child and there is in force either a residence or care order, then one of those people can only lawfully cause a change of the child's surname if all other people with parental responsibility consent in writing.

In any other situation it is necessary for the person seeking to change a child's surname to obtain an appropriate order from a court.