



Post 16 Student Application pack

This booklet contains information regarding how to apply for Grace Academy Darlaston Post 16 for September 2021



Post 16



Grace. Potential. Excellence. Respect. Integrity.

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PLEASE COMPLETE THIS FORM IN CAPITALS & BLACK INK

1 – BASIC DETAILS									
Legal Forename		Preferred Forename							
Legal Surname		Preferred Surname							
Middle Name/s		Date Of Birth		Male	Female				
Preferred pronouns (optional)	<input type="checkbox"/> He/Him	<input type="checkbox"/> She/Her	<input type="checkbox"/> Them/They	<input type="checkbox"/> Other _____					
Flat/Maisonette Number									
House Number		Street							
Town		Post Code							
2A – PARENT/CARER CONTACT DETAILS									
PLEASE									
<ul style="list-style-type: none"> Provide details of all persons who have Parental Responsibility. A copy of the student's FULL Birth Certificate will be required Notify us of any changes as we need to be able to contact the right person quickly if your child is ill 									
PRIORITY CONTACT 1				Relationship to Child:					
Full Name:									
Relationship Status (If Mother or Father) Please TICK below:									
Single		Married		Divorced		Separated		Live With Partner	Civil Partner
Address									
Flat/Maisonette Number		Flat/Maisonette Name							
House Number		Street							
Town/City		Postcode							
Home Tel:		Mobile Tel:							
Work Tel:		Email:							
PRIORITY CONTACT 2				Relationship to Child:					
Full Name:									
Relationship Status (If Mother or Father) Please TICK below:									
Single		Married		Divorced		Separated		Live With Partner	Civil Partner
Address									
Flat/Maisonette Number		Flat/Maisonette Name							
House Number		Street							
Town/City		Postcode							
Home Tel:		Mobile Tel:							
Work Tel:		Email:							

Student Admission Form

2B – ADDITIONAL CONTACT DETAILS

PLEASE ensure that consent is given before entering personal details.

- Enter the details of any other persons that we could contact in the event of an Emergency
- We will contact Parent/Carers first
- Additional Contacts will be contacted if we are unable to contact Parents/Carers

ADDITIONAL CONTACT 1		Relationship to Child:	
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Full Name:			
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Home/Work Tel:		Mobile Tel:	
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ADDITIONAL CONTACT 2		Relationship to Child:	
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Full Name:			
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Home/Work Tel:		Mobile Tel:	
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2C – FAMILY LINKS

PLEASE

- Give the name, year group and **TICK** Male or Female of any siblings or other family members attending Grace Academy

Name		Year		Male		Female		Relationship	
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Name		Year		Male		Female		Relationship	
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Name		Year		Male		Female		Relationship	
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3 – MEDICAL INFORMATION

Doctor/Surgery Name:		Doctor/Surgery Telephone:	
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Doctor/Surgery Address:		Postcode:	
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The Equality Act defines a disabled person as anyone who has, or has had a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day-to-day activities.

Therefore, do you consider the student to have a disability or long term health condition? If yes, please provide further information below including auxiliary aids required.	Yes		No	
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Disability and/or Medical Conditions information (Including allergies and medication taken):

As a school we will need to process personal data to carry out official functions. However, due to changes in the law relating to individuals personal data (This is called General Data Protection Regulation GDPR) we will require further consent from you throughout your child's time with us at Grace Academy. It is essential that information is completed and returned promptly so that your child does not miss out on any opportunities where consent is required. You may withdraw your consent at any time by writing to the Principal at the Academy.

4 – ETHNIC/CULTURAL INFORMATION

To help in monitoring Equal Opportunities **PLEASE TICK RIGHT HAND SIDE BELOW** for both **Ethnicity and Religion** in relation to the student

White – English		Black – African		Bangladeshi		White/Black African	
White – Irish		Black – Caribbean		Pakistani		White/Black Caribbean	
White – Scottish		Black – Any Other		Chinese		White/Asian	
White – Welsh		Gypsy/Roma		Asian/Any Other		White/Any Other	
Traveller Irish Heritage		Prefer Not To Say		Other Please Specify			

5 – RELIGION

Buddhist		Christian		Hindu		Jehovah’s Witness	
Jewish		Muslim		Sikh		Refused	
No Religion		Other Please Specify					

6A – LANGUAGE & NATIONALITY

Home Language				Passport Number			
First Language				Passport Expiry Date			
English as an Additional Language	Yes		No		6B – ASYLUM STATUS – Please Tick	<input type="checkbox"/> Asylum Seeker	<input type="checkbox"/> Refugee

7 – ADDITIONAL INFORMATION

Previous School				Reason For Leaving			
Start Date				Leave Date			
Has your child ever been excluded from a school or academy? If so please give details.							

PHOTOGRAPH/VIDEO IMAGES

Grace Academy would like to use photographs, quotes and video images of your child. These can be used to demonstrate or promote activities relating to the Academy’s curriculum and extra curriculum provision. Therefore, quotes & images may appear within the Academy or externally. This may include the Academy website, social media pages, newsletter’s, associated print and television appearances. Please **TICK** to give your consent to your child’s name being used and your child being photographed or videoed. If you wish to withdraw your consent at any time please do so by writing to the Principal at the Academy. Please note in addition to the above your child’s image will be retained on the Academy database for identification purposes only.

Photograph/Video/Quote Consent		Student Full Name Next to any Image/Photo Consent	
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Although safeguarding is a priority at Grace Academy, please note that the internet can be viewed throughout the world. Further information is available on our website within the Digital Policy and other Policies, as to Academy requirements for Student and Staff safety.

8 – SIGNATURE

General Data Protection Regulations. The Academy will hold personal relevant data relating to your child and yourself. Under the GDPR the Academy has a duty to protect this information and keep it up to date. The Academy is required to share some of the data with the Local Authority and with the DFE. I certify that to the best of my knowledge, the information given on this form is true and correct.

Relationship to Child:		Date:	
Parent/Carer Signature:			
How did you hear about Grace Academy? (Please TICK all that apply)			
		Community	
Academy Website		Primary School	
		Friend/Family	
		Media	
		Other	

OFFICE USE ONLY

INPUT TO SIMS – STAFF SIGNATURE & DATE		SCANNED TO LINK DOCS – STAFF SIGNATURE & DATE	
ADMISSION NUMBER		YEAR	TG

Medical Questionnaire

Student name:	D.O.B	Form:
Date:	Year:	

Address:

Parent/Carer:		
Telephone number(s)		
Mobile:	Work:	Home:

Doctor:
Contact number:
Extra Care:
Consultant:

Medical condition(s) and details:
Actions to take in case of an emergency:
Any Medication:
Last episode/triggers:

At Grace Academy we operate a two tier system.

ALL students have a completed medical questionnaire (this document) saved to their file, and their medical details are available to staff in case of medical incident.

Pupils with more serious medical conditions (including: asthma; eczema; allergies; epilepsy; diabetes; physical disability; visual or hearing impairment; digestive disorders) carry an IHCP (individual Healthcare Plan) which is attached to their individual file in case of emergency.

If you feel that your child requires an IHCP please tick this box and our Medical Needs Coordinator will contact you to complete the IHCP paperwork

All PARENTS/CARERS:

I..... agree to this medical document being shared with staff, and if necessary with medical professionals. I will notify Grace Academy Darlaston if my child's condition changes.

SIGN..... PRINT.....Date.....

Dear Parents / Carers,

At Grace Academy Darlaston, we pride ourselves on providing the best support tailored to students' individual needs. In order to do this effectively, we will occasionally need to identify students' personal needs through screeners and tests. We are unable to provide diagnosis but we can screen students for signs of a number of educational needs such as dyslexia and dyscalculia. We also have checklists and programmes to help us in identifying other traits such as those attributed to Autism, ADHD and more.

Please sign the form below to provide the Academy with consent to complete SEND-specific observations or screening, where this may be appropriate. The Learning Support Team will endeavour to keep you well-informed throughout the process and you will be invited to discuss any results from which action may be needed.

If you have any queries, or would like to discuss screening for your child, please contact Tracey Lunn, Assistant to the SENCOs, in the first instance on 0121 568 3300 or traceylunn@darlaston.graceacademy.org.uk

Yours Sincerely,

Sophie Chance
Assistant Principal (DSL / SENCO)

I, Parent / carer of _____ give my consent for the Learning Support Team to carry out SEND screening where deemed appropriate.

Signed:

Date:

CONSENT FORM FOR THE RECORDING AND USE OF IMAGES

NAME OF PUPIL YEAR GROUP FORM

Dear Parent/Carer

During the course of the school year, we may sometimes wish to take photographs or video recordings of children within school or on school trips, either for our own records, for use as part of our learning curriculum or for inclusion in our promotional material such as the school prospectus and our website.

The school may also invite an external photographer to the school each year to take official school photographs and may invite the media in to take photographs of pupils engaged in school activities or events for publication.

To comply with the General Data Protection Regulation, we need to ask your consent before the school record any images of your child. **In view of this, please read the statements below, complete the slip and return this form to school within the next 10 days.**

This table sets out the various reasons for taking, and making use of, images of your child and we should be grateful if you would indicate whether or not you give consent for use in these circumstances. By indicating 'YES', you are confirming that you consent to your child's personal data being shared for those purposes and/or with the named third parties):

PLEASE CIRCLE RESPONSES

1.	For official school photographs, with images taken by the Academy official photographer and available for purchase by parents, and held by the school for identification purposes with names attached	YES/NO
2.	For use on displays in the Academy	YES/NO
3..	For use on the Academy website	YES/NO
4.	For use on the Academy Facebook page	YES/NO
5.	For use on the Academy Twitter page	YES/NO
6.	Sharing of images of your child taken for internal purposes with external media organisations or inviting media organisations to take photographs of pupils (including your child) engaged in school activities or events for publication	YES/NO

We also need your consent before your child's name would be attached to any images accessible externally to the school (for example social media, other websites or the print media). Please indicate below whether you consent to this:

Attaching your child's name to images accessible externally to the school (for example social media, other websites or the print media)	YES/NO
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Please note, you have the right to withdraw or change your consent at any time by completing a new consent form. You can notify us of your consent withdrawal or any changes at any time by completing a new consent form.

Signature Name of parent/carers.....

Date.....

Notification of intention to process pupils' Biometric Information

Grace Academy Darlaston wishes to use information about your child as part of an automated (i.e. electronically-operated) recognition system. This is for the purposes of catering provision. The information from your child that we wish to use is referred to as 'biometric information' (see next paragraph). Under the Protection of Freedoms Act 2012 (sections 26 to 28), we are required to notify each parent of a child and obtain the written consent of at least one parent before being able to use a child's biometric information for an automated system.

Biometric information and how it will be used

Biometric information is information about a person's physical or behavioural characteristics that can be used to identify them, for example, information from their finger image. We would like to take and use information from your child's finger image and use this information for the purpose of providing your child with catering services. The information will be used as part of an automated biometric recognition system. This system will take measurements of your child's finger and convert these measurements into a template to be stored on the system. An image of your child's finger is not stored. The template i.e. measurements taken from your child's finger, is what will be used to permit your child to access services.

You should note that the law places specific requirements on schools and colleges when using personal information, such as biometric information, about pupils for the purposes of an automated biometric recognition system. For example: (a) the school cannot use the information for any purpose other than those for which it was originally obtained and made known to the parent(s) (i.e. as stated above); (b) the school must ensure that the information is stored securely; (c) the school must tell you what it intends to do with the information; (d) unless the law allows it, the school cannot disclose personal information to another person/body – you should note that the only body that the school wishes to share the information with is our system provider CRB Cunninghams and Biostore who process the data on our behalf.

Providing your consent/objecting as stated above

In order to be able to use your child's biometric information, the written consent of at least one parent is required. However, consent given by one parent will be overridden if the other parent objects in writing to the use of their child's biometric information. Similarly, if your child objects to this, the school cannot collect or use his/her biometric information for inclusion on the automated recognition system. You can also object to the proposed processing of your child's biometric information at a later stage or withdraw any consent you have previously given. This means that, if you give consent but later change your mind, you can withdraw this consent. Please note that any consent, withdrawal of consent or objection from a parent must be in writing. Even if you have consented, your child can object or refuse at any time to their biometric information being taken/used. His/her objection does not need to be in writing.

We would appreciate it if you could discuss this with your child and explain to them that they can object to this if they wish. The school is also happy to answer any questions you or your child may have. If you do not wish your child's biometric information to be processed by the school, or your child objects to such processing, the law says that we must provide reasonable alternative January 2021 arrangements for children who are not going to use the automated system. Arrangements would need to be discussed and agreed.

If you give consent to the processing of your child's biometric information, please sign, date and return the enclosed consent form to the school. Please note that when your child leaves the school, or if for some other reason he/she ceases to use the biometric system, his/her biometric data will be securely deleted. Further information and guidance can be found via the following links: Department for Education's 'Protection of Biometric Information of Children in Schools – Advice for proprietors, governing bodies, head teachers, principals and school staff': <http://www.education.gov.uk/schools/adminandfinance/schooladmin>. ICO guide to data protection for organisations: [Guide to data protection | ICO guidance on data protection for education establishments: Education.](#)

CONSENT FORM FOR THE USE OF BIOMETRIC INFORMATION IN SCHOOL

Please complete this form if you consent to the school taking and using information from your child's finger image by Grace Academy Darlaston as part of an automated biometric recognition system. This biometric information will be used by Grace Academy Darlaston for the purpose of catering provision for which this data will be used. In signing this form, you are authorising the school to use your child's biometric information for this purpose until he/she either leaves the school or ceases to use the system. If you wish to withdraw your consent at any time, this must be done so in writing and sent to the school at the following address: Data Protection Office, Grace Academy Darlaston, Herberts Park Road, Wednesbury, WS10 8QJ.

Once your child ceases to use the biometric recognition system, his/her biometric information will be securely deleted by the school.

Having read guidance provided to me by Grace Academy Darlaston, I give consent to information from the finger image of my child:

being taken and used by Grace Academy Darlaston for use as part of an automated biometric recognition system for catering provision for which this data will be used. I understand that I can withdraw this consent at any time in writing.

Name of Parent/Carer: _____

Signature: _____ Date: _____

The ICT systems at Grace Academy Darlaston must always be used by staff/students/parents/governors and contractors/guests in an appropriate manner. The Academy reserves the right to monitor any ICT usage and examine or delete any files that may be held on its ICT system. In the event of misuse the relevant Principal/Director will determine the appropriate sanction.

Rules for responsible computer use

The Academy has installed computers and also offers access to the internet, Academy email, and the Academy portal to aid access to information onsite and offsite. Like all Academy equipment the ICT computers and network resources should be treated with respect. In using the Academy ICT equipment you must agree to the following terms:-

- I will only access the system with my own usernames and passwords, which I will keep a secret and not share with fellow students or colleagues.
- I will not access, or attempt to access, other users' files.
- I will log off correctly and leave all equipment in the same state as I found it.
- will not cause damage to or interfere with any of the ICT equipment.
- I will report any damage and not attempt to repair, replace, or swap, any faulty ICT equipment.
- I will not display, print or distribute, in any form whatsoever, material that may be regarded as offensive (promoting discrimination of any kind) or copyrighted.
- I will not try to access pornographic, racist or offensive material.
- I will not enter public or private chat rooms.
- I will only email people I know, or that a member of staff has approved.
- I will not open email attachments from an untrustworthy or suspicious source.
- I will not send anonymous messages or forward chain letters and I will not send messages which appear to come from someone else.
- I will not give my home address or telephone number, or arrange to meet someone, unless an appropriate Academy staff member agrees and my parent or carer has given permission. I will be aware of 'stranger danger' when online.
- I will report any unpleasant material or messages sent to me immediately.
- I will not compromise the security of ICT systems, whether owned by the Academy or by other organisations or individuals (including attempting to bypass internet security filters).
- I will not use my own software, or attempt to install any new software, on any Academy computers.
- I understand that copyright and intellectual property rights must be respected. I will not use the Academy ICT systems to plagiarise.
- I understand that the Academy may monitor my computer usage, including any saved files, internet sites I visit, and the contents of my email messages.
- I will not copy or download music, pictures or video files to the Academy network for personal use.
- I will not listen to online music or watch online videos without an appropriate Academy staff member's permission.
- I will not take photographs or record videos of anyone without their permission.
- I will not use the Academy ICT systems for online gaming, online gambling, file sharing, or financial gain unless approved by the Principal in writing.

Student Name (please print):

Date:

Parent/Guardian Signature

Name (please print):

Date:

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- I will not enter public or private chat rooms.
- I will only email people I know, or that a member of staff has approved.
- I will not open email attachments from an untrustworthy or suspicious source.
- I will not send anonymous messages or forward chain letters and I will not send messages which appear to come from someone else.
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