



# RACK HOUSE PRIMARY SCHOOL

**ALL SECTIONS MUST BE COMPLETED BEFORE ADMISSION.**



CLASS :	NURSERY
START DATE :	

ABOUT THE CHILD			
First name:		Legal Surname:	
Middle name:		Preferred Surname:	
Gender : Male <input type="checkbox"/> Female <input type="checkbox"/>		Date of Birth: <i>Please note you must bring in the birth certificate.</i>	
Address:			
Postcode:			
PARENT/CARER DETAILS			
Parent/Carer No.1		Parent/Carer No.2	
Name :		Name:	
Parental Responsibility Yes <input type="checkbox"/> No <input type="checkbox"/>		Parental Responsibility Yes <input type="checkbox"/> No <input type="checkbox"/>	
Relationship to Child:		Relationship to Child:	
Date of Birth:		Date of Birth:	
National Insurance No:		National Insurance No:	
Address , if different from from above.		Address , if different from above.	
Postcode		Postcode	
Contact phone numbers		Contact phone numbers	
Home		Home	
Mobile		Mobile	
Work		Work	
E-mail		E-mail	
Please give names of any brothers or sisters, their ages and their school/playgroup etc.			
Please give details of other people we can contact in an emergency. Please list them in the order you would want us to contact them			
Name	Daytime Phone No.	Address	Relationship to child
Medical Information			
Doctor's Name		Phone No.	
Surgery Address			

**Medical Information that school needs to be aware of:**

(please use the 'notes' section on the back page if necessary)

Does your child : Wear glasses  Wear a hearing aid  Use an inhaler for asthma 

Previous schools & playgroups attended Please list all schools and the dates your child attended	1. <span style="float: right;">Dates from and to:</span>
	2. <span style="float: right;">Dates from and to:</span>
Does your child have any special abilities or difficulties?	No <input type="checkbox"/> Yes <input type="checkbox"/> If you have ticked yes, please give details (use back page if necessary).
Is there any other information you wish school to be aware of ?	No <input type="checkbox"/> Yes <input type="checkbox"/> If you have ticked yes, please give details (use back page if necessary).
Is this a child in care ?	No <input type="checkbox"/> Yes <input type="checkbox"/> If you have ticked yes, please give details (use back page if necessary).
Is any parent serving in the Armed Forces?	No <input type="checkbox"/> Yes <input type="checkbox"/>
<b>Disability Information</b> <i>The council's definition of disability includes people with physical, mental or sensory impairments who experience, or have experienced, restrictions or discrimination in taking part fully in the mainstream of society. For example, they may have been disabled by lack of access in the built environment , segregated services or any other factor which has excluded them from taking part independently or fully in everyday life.</i>	<b>DISABILITY –</b> My child has a disability Yes* [ ] No [ ]  Do you or any members of the child's immediate family have a disability? Yes* [ ] No [ ]  *If you have answered ' yes' to either of the above would you be happy for a member of staff to contact to you about it ? Yes [ ] No [ ]
Religion?	
First Language:	
Is English a second language?	Yes [ ] No [ ] If yes, please tick level of proficiency in English <b>New to English</b> [ ] <b>Competent</b> [ ] <b>Fluent</b> [ ]
Is the family newly arrived in the UK?	Yes <input type="checkbox"/> If Yes, please give date of arrival :
Child's Country of Birth	
Child's Nationality	
How will your child travel to school for the majority of the time?	Walk <input type="checkbox"/> Car <input type="checkbox"/> Bus <input type="checkbox"/> Cycle <input type="checkbox"/> Other – please specify

<b>EQUAL OPPORTUNITIES CLASSIFICATION</b>  <i>Ethnic Origin refers to members of an ethnic group who share the same cultural identity. This does not mean country of birth or nationality.</i>	<b>ETHNIC ORIGIN</b> - I would describe my child's ethnic origin as: (Please tick)		
	Bangladeshi		Other Asian – please specify
	East African Asian		White & Black Caribbean
	Indian		White & Black African
	Other African		White Asian
	Middle East		Other Mixed Origin – please specify
	Other Black – Please Specify		Black British
	Pakistani		Caribbean
	Chinese		Somali
	Vietnamese		Irish
	Kashmiri		White British
			Other White – please specify

### Lunchtime Arrangements

School Meals **MUST** be paid in advance weekly, monthly or termly – payments are made online via ParentPay - we do not accept cash or cheques. We will set up an account for you once your child has started. The current cost of a meal is :

£ 2.20 per day i.e. **£ 11.00** per week.

However, you may be eligible for **Free School Meals** - please answer this question :

Is your joint family income below £16,190 Yes [ ] No [ ]

If you have ticked 'yes' then please complete the **FREE MEAL** form attached which will allow school to make a check on your behalf.

Does your child have any special dietary needs?	No <input type="checkbox"/> Yes <input type="checkbox"/> If you have ticked 'yes', please give details (use back page if necessary).
Lunchtime Arrangements	Paid School Meal <input type="checkbox"/> Free School Meal <input type="checkbox"/> Packed Lunch <input type="checkbox"/>

### Declaration for entitlement to free 30 hours Nursery Provision

Some families will be eligible to claim an **additional** 15 hours of free childcare a week for the school (making the hours up to 30) . To be eligible you must either be a single parent in work or in a two- parent family in which both parents work. **However, if you are not in work this will not affect your nursery place.**

Please answer this question which will allow us to see if you might be available to make this claim on behalf of school:

Please tick as appropriate for your family:			
Is your family a single-parent family	Yes [ ]	Are you in work?	Yes [ ] No [ ]
<b>OR</b>			
Are you a two-parent family	Yes [ ]	Are BOTH parents in work	Yes [ ] No [ ]
<b>30 HOUR CODE IS:</b>			

The offer of a place in the nursery is dependent on you claiming this funding for school if you meet the criteria . Once you have claimed you must provide the eligibility code to school. If you are eligible to claim but fail to do so this will result in the nursery place being withdrawn.

**Parents must apply for the additional 15 hours online via <https://childcarechoices.gov.uk>**

*School staff can help and advise you with this if necessary.*

## DISABILITY FUND ACCESS

This form must be completed if Your child receives Disability Funding.

Is your child eligible and in receipt of Disability Living Allowance (DLA)? Yes  No

If you have answered yes, please complete the rest of the sections on this page.

### Disability Access Fund Declaration

Three and four year old children who are in receipt of child Disability Living Allowance and are receiving the free entitlement are eligible for the Disability Access Fund (DAF).

DAF is paid to the child's early years setting as a fixed annual rate of £615 per eligible child.

If your child is splitting their free entitlement across two or more providers, please nominate the main setting where Manchester City Council should pay DAF?

### Is your child receiving any additional funding from Manchester City Council?

Yes  No

If yes, please declare here:

#### Declaration

I (name)

of (address)

confirm that the information I have provided above is accurate and true. I understand and agree to the conditions set out in this document and I authorise Rack House Primary School to claim free entitlement funding as agreed above on behalf of my child.

In addition, I also agree that the information I have provided can be shared with the local authority and Department of Education, who will access information from other government departments to confirm my child's eligibility and enable this to provider to claim Early Years Pupil Premium (EYPP) , Disability Access Fund (DAF) or 30-hours childcare .

Parent/Carer/Guardian with legal responsibility		Childcare Provider RACK HOUSE PRIMARY	
Signed		Signed	<i>Darren Amesbury</i>
Print Name		Print Name	Darren Amesbury, Headteacher
Date		Date	September 2019

## Parental Permissions

	Please tick	
<p><b>Photographs / Video</b>                      May we use photographs, video recording or sound recording of your child for use in printed publications, promotional publications, as part of our assessment systems and at local and national conferences?</p> <p>Please note that names are not used in external publications so children cannot be identified.</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p><b>Online</b>                      Do you give permission for images, video or sound recording of your child to be used on our online spaces, including the school website, school blog, Facebook and twitter?</p> <p>Please note that if names are used online it will be first names only.</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p><b>ICT</b>                      Do you give your permission for your child to use computers / tablets that have access to filtered internet sites?</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p><b>Trips</b>                      Do you give permission for your child to take part in school trips and other activities that take place off school premises and to be given first aid or urgent medical treatment during any school trip or activity?</p> <p>Please note the following important information before signing this form:                      The trips and activities covered by this consent include;</p> <ul style="list-style-type: none"> <li>○ all visits which take place during/after the school day</li> <li>○ off-site sporting fixtures outside the school day,</li> </ul> <p><b><i>School will send you information about each trip or activity before it takes place.</i></b></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p><b>School Attendance</b>                      I have seen the information concerning attendance and understand the implications with regards to legal action should my child fail to reach satisfactory attendance levels.</p>	Yes <input type="checkbox"/>	
<p><b>Sun Protection Scheme*</b>                      Children in the Nursery &amp; Reception can spend up to two hours outdoors each day and sun protection is therefore vital.</p> <p>Do you give permission for staff to apply medically approved sun protection lotion .</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Signed:</b>	<b>Parent/Carer</b>	<b>Date:</b>

### \*Sun Protection Information

Parents will still be asked to apply lotion in the morning before their child arrives at school AND provide a NAMED sun hat on hot sunny days for their child.

(If your child has a severe medically identified skin condition you will need to advise us. However, our choice of lotion will take eczema as a condition into consideration)

We feel this will make protecting the children an easier and smoother process for you and for us.

Please could you confirm your support and agreement for this by completing the consent form below. A request will be made for a small contribution towards the cost of the lotion at a later date.

## NOTES

Please use this page to let us have any further information about your child .

<b>NURSERY ADMISSIONS – CHECKLIST</b>	
<b>PLEASE ENSURE THAT YOU MUST RETURN THE FOLLOWING TO SCHOOL</b>	
	Please tick
A <b>fully</b> completed admissions form	<input type="checkbox"/>
Your child's birth certificate	<input type="checkbox"/>
<b>If you are working parents (either a single parent in work or a two-parent family in which both parents work) you must also sign up to claim the 30-hours funding at <a href="http://www.childcarechoices.gov.uk">www.childcare choices.gov.uk</a> and inform us of the eligibility code you are given.</b>	

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