





PLEASE NOTE THAT THE INFORMATION GIVEN ON THIS FORM WILL BE USED BY THE ACADEMY FOR EDUCATIONAL PURPOSES. PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS.



PROPOSED DATE OF ADMISSION: SEPTEMBER 2022



BASIC DETAILS OF STUDENT:			
Please note the LEGAL SURNAME will be used on all examination certificates			
LEGAL FORENAME			
MIDDLE NAMES			
LEGAL SURNAME			
PREFERRED SURNAME			
PREFERRED FORENAME			
DATE OF BIRTH			
GENDER (PLEASE CIRCLE)	MALE	FEMALE	OTHER



 ADDRESS OF STUDENT & PARENT WITH WHOM THE STUDENT LIVES	
HOUSE NAME	
HOUSE NUMBER	
STREET	
DISTRICT	
TOWN/CITY	
COUNTY	
POST CODE	
HOME TELEPHONE NUMBER	


SIBLINGS			
Please list below any siblings attending/ ever attended John O'Gaunt			
NAME		REG GRP	
NAME		REG GRP	
NAME		REG GRP	
NAME		REG GRP	

CONTACT 1 - Please enter the contact details for <u>Parent 1/ Responsible Adult with whom the student lives</u> . Indicate whether the email address is a home or work address.			
TITLE & NAME		RELATIONSHIP	
MOBILE TELEPHONE NUMBER			
WORK TELEPHONE NUMBER			
EMAIL – PRIMARY (ESSENTIAL)			Home / Work

CONTACT 2 - Please enter the contact details for <u>Parent 2/Responsible Adult with whom the student lives</u> if applicable. Indicate whether the email address is a home or work address.			
TITLE & NAME		RELATIONSHIP	
MOBILE TELEPHONE NUMBER			
WORK TELEPHONE NUMBER			
EMAIL – PRIMARY (ESSENTIAL)			Home / Work

EMERGENCY CONTACT			
<p>CONTACT 3 - In the event of a real emergency the Academy would make every effort to contact the child's parents on the numbers provided. Only if these attempts fail would we get in touch with the emergency contact who must be local enough to be able to help in such an eventuality. Please therefore do not repeat the information already supplied when completing this section.</p>			
TITLE & NAME		RELATIONSHIP	
HOME TELEPHONE NUMBER			
MOBILE TELEPHONE NUMBER			
WORK TELEPHONE NUMBER			

LEGAL GUARDIAN/ABSENT PARENT			
<p>Does any other person have parental responsibility for, but does not live with the student? If this is the case please enter the name and address of that person/persons here (note you are not legally obliged to give this information but the Academy is required to ask).</p>			
TITLE & NAME		RELATIONSHIP	
HOUSE NUMBER /NAME			
STREET			
DISTRICT			
TOWN/CITY			
COUNTY & POST CODE			
HOME TELEPHONE NUMBER			
MOBILE TELEPHONE NUMBER			

MEDICAL INFORMATION		EXISTING CARE PLAN: YES/NO (PLEASE CIRCLE)
DOCTOR'S SURGERY		
TELEPHONE NUMBER		
<p>Please indicate any medical conditions, including medication, of which you feel we should be aware. Please state dose and time/s administered. In the case of allergies please state the severity and nature of the allergy.</p>		
1 - MEDICAL CONDITION		
1 – DETAILS/MEDICATION (if any)		
2 - MEDICAL CONDITION		
2 – DETAILS/MEDICATION (if any)		

<p>PASTORAL RECORD – Has your son/daughter received any pastoral support at his/her current school and/or been referred to any external agency e.g. CAMHS, Social Worker, Education Welfare Officer.</p> <p><i>Please note: this information is to ensure we have all the relevant information to support your son/daughter in their transition from their previous school.</i></p> <p>Please give details-</p>
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ETHNICITY		
The information below is a statutory requirement for the DfE please '✓' in appropriate box. (Only 1 tick required)		
ANY OTHER BLACK BACKGROUND	JAPANESE	TURKISH/TURKISH CYPRIOT
ANY OTHER MIXED BACKGROUND	MOROCCAN	WHITE BRITISH
BANGLADESHI	NEPALI	WHITE IRISH
BLACK AFRICAN	OTHER ASIAN	WHITE AND ASIAN
BLACK CARIBBEAN	OTHER ETHNIC GROUP	WHITE AND BLACK AFRICAN
CHINESE	OTHER GYPSY/ROMA	WHITE AND BLACK CARIBBEAN
FILIPINO	PAKISTANI	WHITE EASTERN EUROPEAN
GYPSY	REFUSED	WHITE OTHER
GYPSY ROMA	THAI	WHITE WESTERN EUROPEAN
INDIAN	TRAVELLER OF IRISH HERITAGE	

FIRST LANGUAGE – “first language” is the language to which a pupil was first exposed in their early childhood.				
The information below is a statutory requirement for the DfE please '✓' in appropriate box. (Only 1 tick required).				
ARABIC	ENGLISH	IGBO	PANJABI	SPANISH
BENGALI (ANY OTHER)	FINNISH	ITALIAN	PASHTO/PAKHTO	SWAHILI/KISWAHILI
BENGALI (SYLHETI)	FRENCH	JAPANESE	PERSIAN/FARSI	SWEDISH
BRITISH SIGN LANGUAGE	GAELIC (SCOTLAND)	KOREAN	POLISH	TAGALOG/FILIPINO
CARIBBEAN CREOLE ENGLISH	GAELIC/IRISH	KURDISH	PORTUGUESE	TAMIL
CARIBBEAN CREOLE FRENCH	GERMAN	LINGALA	ROMANY/ENGLISH ROMANES	TURKISH
CHINESE	GREEK	LUGANDA	RUSSIAN	URDU
CORNISH	GUJARATI	MANX GAELIC	SERBIAN/CROATIAN/BOSNIAN	VIETNAMESE
DANISH	HEBREW	NORWEGIAN	SINHALA	WELSH/CYMRAEG
DUTCH/FLEMISH	HINDI	*OTHER	SOMALI	YORUBA
*OTHER – please specify				

RELIGION		
AGNOSTIC	HINDU	OTHER RELIGION
ANGLICAN	JEHOVAH'S WITNESS	ROMAN CATHOLIC
BAPTIST	JEWISH	SIKH
BUDDHIST	METHODIST	UNITED REFORM CHURCH
CHRISTIAN	MUSLIM	REFUSED
CHURCH OF ENGLAND	NO RELIGION	

NATIONAL IDENTITY					
BRITISH		IRISH		SCOTTISH	
ENGLISH		WELSH		OTHER	

ENGLISH AS AN ADDITIONAL LANGUAGE	
Please circle as appropriate	YES / NO

ADDITIONAL INFORMATION Please circle only one as appropriate	
MEAL TYPE	FREE SCHOOL MEALS / HOME / SCHOOL MEALS / PACKED LUNCH
MODE OF TRAVEL	BUS (type unknown) / CAR SHARE / CAR or VAN / CYCLE DEDICATED SCHOOL BUS / WALK / PUBLIC BUS SERVICE / TAXI

SERVICE CHILDREN IN EDUCATION – a student is deemed to come from a service family if at least one parent (living with the student) is currently serving in the Armed Forces (i.e. Royal Navy, Army or Royal Air Force)	
Please circle as appropriate	YES / NO / REFUSED

DISABILITIES

We are committed to making sure that John O’Gaunt is a happy and successful experience for all of our students. Where a student has a particular difficulty or need we will do our best to put measures in place to overcome this.

1 - Please indicate whether your child has any health problems or disabilities which mean that they have substantial difficulties with any of the areas of his/her life shown below? Please tick all that apply.

By long-standing we mean anything that has troubled them over a period of at least 12 months or that is likely to affect them for at least 12 months. Please exclude difficulties that you would expect for a child of that age.

If none apply please go to **SCHOOL HISTORY** section on page 5.

MOBILITY – MOVING AROUND INDOORS OR OUTDOORS	
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HAND MOVEMENTS – TOUCHING OR HOLDING	
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PERSONAL CARE – GOING TO THE TOILET, DRESSING	
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EATING AND DRINKING WITHOUT HELP	
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INCONTINENCE – WETTING OR DIRTYING	
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TAKING MEDICATION (please provide details in MEDICAL INFORMATION section above)	
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COMMUNICATION - SPEAKING WITH OTHERS, OR UNDERSTANDING THEM	
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LEARNING – NUMBERS, LETTERS, WORDS	
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HEARING IMPAIRMENT	
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VISION IMPAIRMENT	
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BEHAVIOUR – VERY ACTIVE, HAS A SHORT ATTENTION SPAN, BEHAVES UNACCEPTABLY	
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HAS FITS OR SEIZURES	
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DIAGNOSED WITH AUTISM OR ASPERGER’S SYNDROME	
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HAS A LIFE-LIMITING CONDITION OR REQUIRES PALLIATIVE CARE	
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CAN BE DEPRESSED, OR ANXIOUS, OR HAS AN EATING DISORDER	
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OTHER (PLEASE DESCRIBE OTHER AREAS OF GREAT DIFFICULTY) please include here whether your child needs special Access Arrangements (including for example extra time, a scribe or reader in exams or internal assessments).

Please circle to indicate whether you can provide proof of Access Arrangements.

YES/NO

SPECIAL EDUCATIONAL NEEDS:

Please Circle if your child is considered to:

Require additional SEN support

Please Indicate if your child has a Statement/ EHC Plan:

YES / NO

DISABILITIES - continued	
2 - Does your child take any medication, use any physical aids or require any special diet or supplements?	YES / NO
3 - If your child did not take this medication, use this physical aid or have a special diet or supplements, would he/she have substantial difficulties with any of the areas of life listed previously?	YES / NO
4 - Has your child seen a professional, such as a paediatrician or a psychologist or a speech and language therapist because of the difficulty?	YES / NO
If YES, please provide further details:	

LOOKED AFTER CHILDREN	
Is the student a 'Looked After Child'?	YES / NO
Which Local Authority is responsible for the welfare of the student?	

YOUNG CARERS	
Is the student a Young Carer?	YES / NO

Adopted from care and the pupil premium	
<p>We need to record students who were looked after immediately before adoption on or after 30 December 2005*, being placed on a special guardianship order (SGO) or residence order (RO). The primary reason for collecting this data item is because from April 2014 eligible pupils adopted from care or who left care under an SGO or RO will attract pupil premium funding of £1900. Parents should provide supporting evidence, for example, a photocopy of the adoption order. Parents may conceal sensitive information (e.g. the name of the birth parents).</p> <p>*30 December 2005 was the date when the Adoption and Children Act 2002, which reformed adoption and introduced Special Guardianship Orders, came into force.</p> <p>please '✓' in appropriate box. (Only 1 tick).</p>	
Ceased to be looked after through Adoption on or after 30 December 2005	
Ceased to be looked after through a Special Guardianship Order (SGO) on or after 30 December 2005	
Ceased to be looked after through a Residence Order (RO)	
Ceased to be looked after through a Child Arrangement Order (CAO)	

SCHOOL HISTORY			
PREVIOUS SCHOOL			
DATE OF ADMISSION		DATE OF LEAVING	
REASON FOR LEAVING			
STREET			
TOWN/CITY			
COUNTY & POST CODE			

DECLARATION:

I certify that the information provided in this form is accurate and correct. I undertake to inform John O’Gaunt of any changes in the personal and medical circumstances of my child (e.g. change of address, emergency telephone contact number, etc.) and any change in any aspect of parental responsibility.

Signed: _____ (Parent) Date: _____

PHOTOGRAPHS:

On occasion, it may be necessary to create images of children who attend John O’Gaunt. This usually applies to photographs. John O’Gaunt holds photographic records in order to be able to identify a child and on occasion photographs or film videos are taken at sports days, special events, trips, school productions and sometimes for school publications.

We use these images in a variety of ways particularly to celebrate our successes and communicate to parents and the wider community. We are asking the following detailed questions to ensure we are compliant with the new data protection rules.

We value the use of photos of students, to be able to showcase what our students do in school and show what life at our school is like to others. Our students enjoy their successes being celebrated.

John O’Gaunt is only responsible for photographs taken by the school or an authorised agent of the school.

We would like your consent to take images of your child, and use them in the ways described below. If you are not happy for us to do this, please indicate in the section below.

Please tick the relevant box(es) below to confirm your consent as appropriate. Your consent will remain in place for the duration of your child’s education at John O’Gaunt until the end of Year 11.

- I am happy for the school to take additional images of my child.
- I am happy for images of my child to be used on the School and Excalibur Academies Trust Websites.
- I am happy for images of my child to be used in School and Trust newsletters.
- I am happy for images of my child to be used in School prospectuses and publications, either printed or electronic.
- I am happy for images of my child to be used in internal displays.
- I am happy for images of my child to be used by other students to meet the requirements of the curriculum, coursework or exams.
- I am happy for images of my child to be used on the School’s social media accounts (including Facebook and Twitter)
- I am **NOT** happy for the school to take or use images of my child other than for the purposes of identification.

Signed: _____ (Parent) Date: _____

If you change your mind at any time, you can let us know by emailing jogoffice@excalibur.org.uk or by calling the school on 01488 682400.

EMERGENCY ACADEMY CLOSURE:

Should an emergency arise during the academy day, the Principal has the responsibility to decide what action to take and one outcome could be closure of the Academy. Guidelines are:

- Students in Years 7 & 8 would be sent home to a responsible adult;
- Students in Years 9-11 could make their own way home and be deemed responsible enough to be home alone;
- Arrangements would be made to take home all students who travel in organised transport with the normal providers.

Should a decision be made to close the Academy during the day, particularly over the winter months, contingency care arrangements need to be in place for your child; especially if you have a child/children in Years 7 or 8. If both parents are working during the day this should be a safe and familiar environment; may be the family home or the home of a relative or emergency contact. Please reinforce this arrangement with your child.

OUT OF ACADEMY/AFTER ACADEMY ACTIVITIES:

As part of normal Academy activities there are occasions throughout the year when students are off site in the environs of Hungerford: to visit churches; carry out surveys in the High Street; or to participate in sporting activities with other local schools.

On these occasions, we will assume we have your permission to include your child/children in any Out of Academy Activity **during the timetabled day**. If you do not give your permission, please notify John O'Gaunt in writing and on such occasions the student will be asked to remain in the confines of the Academy and undertake supervised studies.