



Nursery@  
Dartmouth Academy

# Application Pack





# Welcome to Nursery@ Dartmouth Academy



## Opening hours

The nursery is open Monday to Friday, 8:50am to 3:15pm during term time. No fees are charged when the nursery is closed. The nursery will operate between the hours of 8:50am to 11:50am for morning sessions and 12:15pm to 3:15pm for afternoon sessions. In the case of sickness and holidays, we regret that there is no reduction if a place is not used to its full capacity.

## Change of Details

It is essential that we are kept fully updated of any changes to address and telephone numbers of parents at home and work, as well as any changes to any emergency contact persons and their contact details. We also have to be informed if there is any change in details of the custody for a child. It is the responsibility of parents to keep the nursery up to date with such details.

## Absences due to sickness or holidays

For the convenience of parents/guardians the nursery is open and fully staffed as described. We therefore regret that there is no reduction in fees for any absence from nursery for holidays or sickness.

Because the numbers in each age group are strictly governed by Ofsted, we regret that the nursery is unable to offer any flexibility on this condition and parents accepting a place at nursery are deemed to have fully understood this provision. It is the place, exclusively reserved for your child that is being charged for, not the attendance of the child.

## Extra days

Children with an existing nursery place may book extra days at nursery, subject to availability. These bookings must be paid for at the time of booking and made at least 24 hours in advance.

## Fees

Fees at a rate of £13 per session of 3 hours, are payable in advance by the first of each month. We reserve the right not to accept a child into the nursery (above their 15 hour entitlement) if the fees are more than two weeks late without prior agreement.



### Booking details

Please tick which sessions you would like your child to attend, you are only funded for 3 sessions.

DAY	A.M. SESSION	P.M. SESSION
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

*Please note that changes to the sessions need to be notified one month in advance.*

Admission Date	
----------------	--

### Notice

#### Leaving Nursery:

Four weeks' notice is required when a child leaves the nursery (or four week's fees in lieu of notice). Notice must be in writing to the Finance Department. Notice will be deemed to start from when the notice is received. Your written notice will be acknowledged in writing.

#### Changes to booking:

Four weeks written notice is required if you wish to reduce your sessions. Subject to availability we will do our best to accommodate any extra or changed days as far as possible.

In the unlikely event that any child is constantly behaving in an unacceptable manner (at the Academy's discretion), parents may be asked to withdraw their child from the nursery.





I am aware that it is my duty to keep all contact information up to date and current. I am also aware that I have to inform the nursery of any changes to the child's usual drop off or pick up routine. It is my duty to introduce any person who I instruct to pick up or drop off my child to one member of the nursery staff. Any person picking up a child has to be over 16 years of age.

**Signature:**

**Date:**

Would you like to make us aware of any special consideration for the care of your child?

### Parents Declaration

We have read the Dartmouth Academy Nursery Terms and Conditions above and agree to abide by them.

**Signed:**

..... **Date:** .....

**Parent Full Name** (PLEASE PRINT): .....



**Signed:**

..... **Date:** .....

**Parent Full Name** (PLEASE PRINT):

.....



**Permission for Schools to Provide Intimate Care**

Child's Last name:	
Child's First name:	
Male / Female:	
Date of birth:	
Parent Carers name:	
Address:	

***I understand that:***

I give permission to the school to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting.

I will advise the Nursery staff of any medical complaint my child may have which affects issues of intimate care.

**Name** (PLEASE PRINT): .....

**Signature:** ..... **Date:** .....

**Relationship to child:** .....





**Nursery@  
Dartmouth Academy**

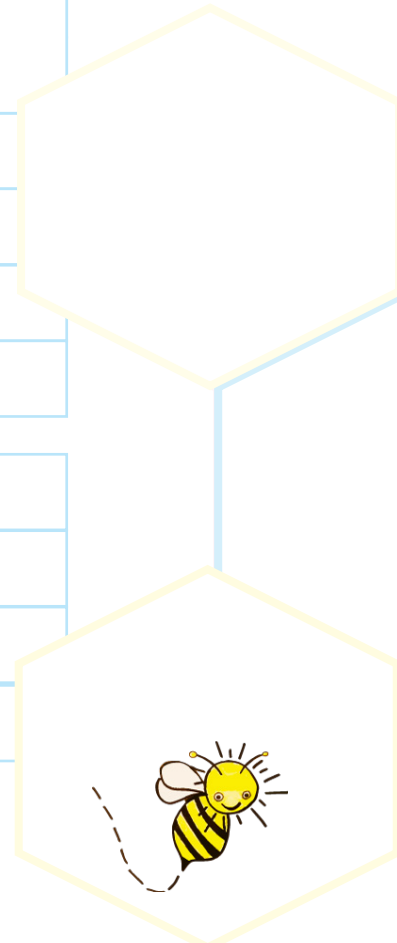
# New Student Information Form



Child's Forename:			
Child's Surname:			
Date of Birth:		Year Group:	

Name of Parents / Guardians			
E-mail:			
Telephone Number:			
Current Address:			
New Address:			
Date of move:			
New Telephone Number:			

Current / Previous School:			
School Telephone Number:			
Interview date & time:			
Funding Code			





*New Student Information Form continued....*

**Comments to include  
SEND info:**

**Feedback from tour /  
next steps:**



# 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

**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 <sup>1</sup>  
 Eastern European <sup>2</sup>  
 Other <sup>3</sup>

**Mixed**

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

**Chinese**

- Hong Kong Chinese  
 Other Chinese <sup>4</sup>

**Black or Black British**

- Caribbean  
 African  
 Any other Black background

**Asian or Asian British**

- Indian  
 Pakistani  
 Bangladeshi  
 Any other Asian background

**Any other ethnic background**

- Afghan  
 Arab <sup>5</sup>  
 Filipino  
 Iranian  
 Japanese  
 Malay <sup>6</sup>  
 Thai  
 Any other Ethnic group <sup>7</sup>

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, Croatia, 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 language<sup>1</sup>** 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

<sup>1</sup> *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 <sup>1</sup>     Dedicated school bus <sup>2</sup>     Taxi     Walk  
 Car/van     Public service bus <sup>2</sup>     Bus (type not known) <sup>2</sup>     Train     Other

<sup>1</sup> with child/children from a different household

<sup>2</sup> 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
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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)

Section to be completed by schools in compliance with General Data Protection Regulations (GDPR). Schools may wish to add an explanatory paragraph regarding their data management and make reference to their privacy notice (potentially via weblink) and named Data Protection Officer here.

Please see weblink below for Department for Education privacy notice template and data protection toolkit;

<https://www.gov.uk/government/publications/data-protection-and-privacy-privacy-notices>

<https://www.gov.uk/government/publications/data-protection-toolkit-for-schools>

Please see weblink below for Devon County Council Information Governance advise for schools;

<https://www.devon.gov.uk/supportforschools/administration/information-governance>

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-notice>



# 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

Home



Work



Mobile



Other



### Email

Home

Work

Notes


**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:

Mother

Social worker

Foster mother

Teacher

Father

Religious/spiritual contact

Headteacher

Doctor

Other family member

Childminder

Step father

Carer

Other relative

Foster father

Step mother

Other contact

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

**3.3**

**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:

Mother

Social worker

Foster mother

Teacher

Father

Religious/spiritual contact

Headteacher

Doctor

Other family member

Childminder

Step father

Carer

Other relative

Foster father

Step mother

Other contact

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

Home

Work

Mobile

Other

Notes

**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 |
| <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  NoIs 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	<input type="text"/>
Work	<input type="text"/>

**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

## 4

## Parental responsibility

**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>

## 5

## General principles for schools

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.





Nursery@  
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# Home-Academy Agreement

Child's Name:	
Name of Parent / Guardian:	
Preferred Contact details e-mail address:	
Telephone Number:	

Enclosed in the following booklet you will find our Consent Forms and Home Academy Agreement, which need to be **fully completed and returned to the Main Reception.**

To make sure that you have signed all the necessary parts to this form please use the tick list below once you have filled in the relevant form.

Please tick

<input type="checkbox"/>	Medical Information & Administration of Medicine Parental Consent Form
<input type="checkbox"/>	Academy Holiday Policy
<input type="checkbox"/>	GDPR Consent for Photographs
<input type="checkbox"/>	Home Academy Agreement

*For Office Use Only:*

Date Returned: .....





**Nursery@  
Dartmouth Academy**

# Home-Academy Agreement



Staff and Governors at Dartmouth Academy believe that pupils will have the **best opportunity to achieve their full potential** if the Academy, parents and pupils themselves work **together in partnership**.

**Article 28:** Every child has the right to an education. You should be encouraged to go to school to the highest level possible. Discipline in schools should respect children's dignity.



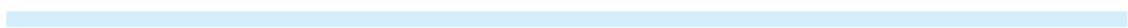
## I will help my child to:

- ▶ **Respect THEIR right to an education**
- ▶ Understand the **Behaviour for Learning Policy**
- ▶ Follow the **Social Distancing Protocol**
- ▶ **Attend** Academy regularly and **on time**, avoiding ALL unnecessary absences.
- ▶ Be **prepared** for the Academy day, dressed in the **correct uniform** and with the **correct equipment**: stationary, books, PE kit.

**Parent Signature:** ..... **Date:** .....

**Parent Full Name** (PLEASE PRINT): .....

As a **Parent / Carer**, I will:



- ▶ **As a duty bearer, uphold my child's right to a good education.**
- ▶ Read the **Behaviour for Learning Policy**
- ▶ Ensure my child **attends regularly** and **punctually** as required by **law**; avoid ALL unnecessary absences, including holiday during **term time**.
- ▶ **Prepare** my child for the Academy day, dressed in the **correct uniform** and with the **required equipment**: books, stationary, PE kit
- ▶ **Communicate** with **all staff** at Dartmouth Academy in a **respectful manner**.

Parent Signature: ..... Date: .....

Parent Full Name (PLEASE PRINT): .....



# Protecting Learning in the Primary Phase

Our Golden Rules	Green	Orange	Red
<p><b>Listen carefully and follow instructions</b></p>	<p>Show whole-body listening            Be responsive            Track the speaker            Follow instructions first time, every time            Show positive body language</p>	<p>You are stopping someone else from accessing their rights</p> <p><b>Article 3: All adults should do what is best for the children</b>            not following instructions</p>	<ul style="list-style-type: none"> <li>• <b>Repeated orange behaviours</b></li> <li>• <b>Serious single event</b></li> </ul>
<p><b>Keep hands, feet and objects to yourself</b></p>	<p>Take responsibility for own actions            Have kind hands and feet</p>	<p><b>Article 19: The right to be protected from being hurt</b>            saying unkind things            hurting someone</p>	<p><b>Article 28: Discipline should respect children's dignity</b>            A private conversation will take place between adult and child</p>
<p><b>Care for each other, our academy and environment</b></p>	<p>Be helpful            Show empathy            Walk around the academy            Pick up litter if you see it            Recognise when you have hurt someone's feelings            Include others in playtime games</p>	<p><b>Article 23: The right to a good quality education if you have a disability</b>            discriminating            excluding others</p>	<p>Children will have an opportunity to reflect on the behaviours shown</p>
<p><b>Be calm and respectful to others</b></p>	<p>Celebrate our differences            Use good manners            Be collaborative            Be honest            Be pleasant to others            Walk when inside the academy            Speak calmly to others            Be patient</p>	<p><b>Article 28: The right to a good quality education</b>            not following instructions            calling out            distracting others            not joining in</p>	<p>Parents and carers will be involved in the reflection process</p>
<p><b>Be ready to learn</b></p>	<p>Be focused            Be resilient and persevere            Try your best            Complete all Home Learning            Dress in full Dartmouth Academy uniform            Ask for help if you need it            Have equipment ready</p>	<p><b>Article 29: Your education should help you learn to live peacefully, protect your environment and respect other people</b>            damaging property</p> <p><b>Article 31: The right to relax and play</b>            disrupting others' play</p>	



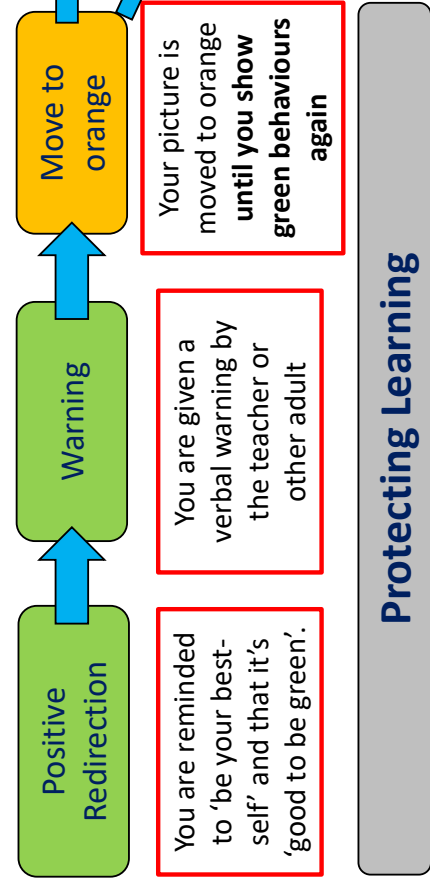
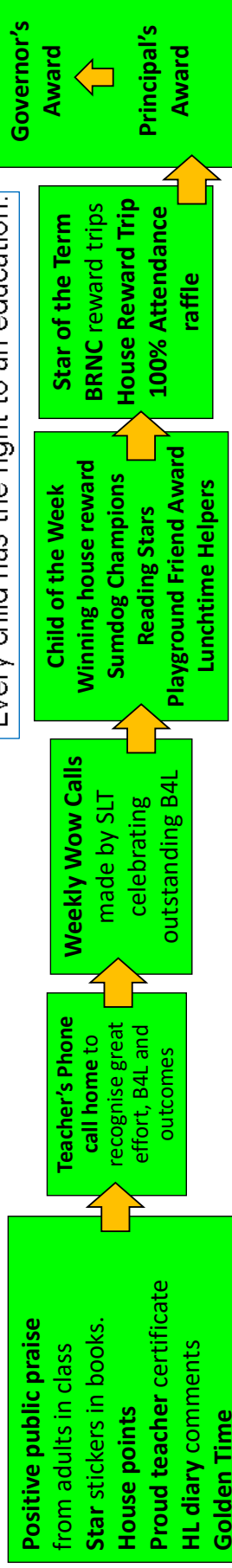


# Recognising Success & Protecting Learning in the Primary Phase

## Recognising and celebrating success

### Article 28

Every child has the right to an education.



## Protecting Learning



**Nursery@  
Dartmouth Academy**

# Consent form for Academy Trips and Off-site Activities



I consent to my child taking part in trips and off-site activities as outlined in the consent for **Academy trips and off-site activities** section of the booklet.

If payment is required for trips - this will be available as Parent Pay.

**Parent Signature:** ..... **Date:** .....

**Parent Full Name** (PLEASE PRINT): .....

**Please contact the Academy if you have any objections to medical attention and /or treatment being administered in case of emergency. Unless instructed otherwise, staff and trip leaders carrying a medical consent list will inform healthcare professionals that you have given your permission for them to provide care in an emergency situation.**

## Protecting Learning in Primary Phase

I confirm that I have received, read and accepted the **Behaviour for Learning Policy:**

**Parent Signature:** ..... **Date:** .....

**Parent Full Name** (PLEASE PRINT): .....

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## Home / Academy Agreement

I confirm that I have received, read and accepted the **Home Academy Agreement**:

**Parent Signature:** ..... **Date:** .....

**Parent Full Name** (PLEASE PRINT): .....

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## No Email Address Declaration. Please complete if you DO NOT have an email address

I would like to confirm that I do not have an email address and would like the Academy to provide communications in a written format. I will inform the Academy and update my details if I get an email address at a later date.

**Parent Signature:**

..... **Date:** .....

**Parent Full Name** (PLEASE PRINT):

.....





**Nursery@  
Dartmouth Academy**

# Consent for Photographs



We take the privacy of personal information seriously. As part of our commitment to the new General Data Protection Regulations (GDPR) we need to seek your consent. Please confirm that you give your consent for the activities listed by completing the tables below:

## ► School Website

We use photographs on the school website to make the information more appealing and to illustrate what we do at school. Children's names will not be used on the site in association with any photographs printed. Most of the photographs put on to our website will be of groups of children and the sports teams.

	Yes	No
<b>I give consent for my child's photograph to be put on the school's website.</b> <i>(Please tick)</i>	<input type="checkbox"/>	<input type="checkbox"/>

## ► School Newsletter

At Dartmouth Academy we are proud to produce a school newsletter where we like to focus on student achievement, trips and visits as well as up and coming events. For this we like to use photos and the students own accounts of what has taken place.

	Yes	No
<b>I give my consent for my child's name and photograph to be used in the school's newsletter.</b> <i>(Please tick)</i>	<input type="checkbox"/>	<input type="checkbox"/>

## ► Local Newspapers

It is recommended that schools do not identify children in photographs on school websites, but many newspapers will not print photographs unless they are able to identify the children in them. As local newspapers are an important tool for publicising and celebrating school activities, please let us know if you do not wish for your child to be included in photographs / press releases in the future.

	Yes	No
<b>I give my consent for my child's name and photograph to appear in newspaper articles.</b> <i>(Please tick)</i>	<input type="checkbox"/>	<input type="checkbox"/>

## ► Social Media

We also have our own Facebook and Twitter pages (*and in the future this may include Instagram*). These pages have been set up as public to communicate with parents, potential parents, and for the local community. We will only post photos (*without names / first name only*) of children with the agreement of parents.

	Yes	No
I give my permission for photos to be included in any Facebook posts. <i>(Please tick)</i>		
I give my permission for photos to be included in any Twitter posts. <i>(Please tick)</i>		
I give my permission for photos to be included in any Instagram posts. <i>(Please tick)</i>		

## ► Celebrating Success

At Dartmouth Academy we like to celebrate the success of our students. This may be in the form of Student of the Month, in assemblies, displaying work by students or to celebrate sporting success. This includes photographs of students and their full name may be displayed throughout the school site.

	Yes	No
I give my consent for my child's photograph and name to be used to 'celebrate success' throughout school. <i>(Please tick)</i>		

## ► Other Organisations

From time to time, your child, may be attending events, or on school trips, held by other organisations and at different venues. At these events the organisers may take photos to capture the event taking place.

	Yes	No
I give my consent for my child to be photographed by other organisations e.g. school trip venues and sporting activities. <i>(Please tick)</i>		

## ► Marketing and Publications

We are part of a wider Academy Trust called Education South West. Part of the Trust's work includes producing publications and promotional material. Photographs may be used in the form of banners, or in leaflets, and publications that are produced to illustrate school life.

	Yes	No
I give my consent for my child's photograph to appear in Academy publicity materials and publications. <i>(Please tick)</i>		

Parent Signature:

..... Date: .....

Parent Full Name *(PLEASE PRINT)*: .....



### Right to withdraw

As part of your rights under the General Data Protection Regulations, you have the right to withdraw your consent at any time. Should you wish to withdraw consent for any of the aspects listed above, please contact:

[admin@dartmouthacademy.org.uk](mailto:admin@dartmouthacademy.org.uk)



**PRIMARY ONLY**

We would like to take this opportunity to clarify our end of day collection procedures. The safety of children in the Academy is of paramount importance. Please nominate up to three adults who have your permission to collect your children from school and complete the form overleaf for each child.

**Timing of School Day**

Nursery - Year 6 finish school at 3.15pm

Please collect your child from outside their classroom.

**After School Activities**

If your child is not going to attend an after-school club or other activity that they have signed up for, please let us know by phone call or letter, explaining the reason for not attending. We are then authorised to let your child leave school prior to this activity, released to a nominated adult.

**Children walking home alone**

If your child is in Year 5 or 6 and you are happy for them to walk or cycle home alone, at the end of each school day, please complete the permission slip below and return to the Main Reception. If you wish your child to be collected by an older brother or sister, our recommendation is that the older child collecting younger brothers or sisters should be 14 years or over.

**Person with parental responsibility to complete and return this reply slip to Dartmouth Academy**

**Year 5 or 6 walking/cycling home**

I give permission for ..... to walk/cycle home alone at the end of each school day.

1. I wish to inform you that my child will be walking or cycling to/from the Academy on a regular basis.
2. I have read and understood the guidelines, systems and reasonable precautions set out in the attached document, which is aimed at ensuring my child is safe.
3. I understand that the Academy requires me to inform them if my child is absent from school for any reason.
4. I understand that the Academy will endeavour to make contact with me on the morning of registered absence if my child is absent from school and no notice (phone call or letter) has been given to the Academy for that absence.
5. I understand that I must complete a 'Holiday request form' for all requested term time holiday leave prior to the said holiday being taken.

**Signed Parent/Carer** ..... **(Print Name)** .....

**Date** .....

**Person with parental responsibility to complete and return this reply slip to Dartmouth Academy**

(Name of child) ..... Date: .....

Class .....

**Authorised adults with permission to collect my child from school (Maximum of 3 Adults)**

**Parents do not need to include their names.**

I give permission for the following adults to collect my child from school.

Name ..... Relationship to child .....

Name ..... Relationship to child .....

Name ..... Relationship to child .....

**Authorised Siblings to collect my child from school**

I give permission for ..... to walk home with ..... at the  
end of each school day.

Relationship to child ..... Age .....

Parents are responsible for informing the Academy immediately should their child be unwell or otherwise unable to attend the Academy. This includes informing the Academy prior to taking their child for any early morning medical examinations (e.g. doctors or dentists) which may cause their child to miss registration in the morning and arrive in the Academy later than 9.15am (the time designated as the official close of registers). To avoid unnecessary time being spent by the Academy in chasing up absent or missing children who have been taken on family holiday-parents must complete an Academy holiday request form in advance of their child taking time away from the Academy.

Signed Parent/Carer ..... Print Name .....

Date .....

Dartmouth Academy  
Milton Lane  
Dartmouth  
Devon  
TQ6 9HW

Telephone:  
01803 839700  
Option 1

[admissions@dartmouthacademy.org.uk](mailto:admissions@dartmouthacademy.org.uk)

