



Welcome to Lightcliffe Academy

Student Admission Form

Please read the Information Pack carefully before completing the Admission Form

Please return this to the school office or email to intake@lightcliffeacademy.co.uk as soon as possible

Student Details

Date of Admission: Previous School:

Legal Surname: Preferred Surname:

Middle Name:

Legal Forename: Preferred Forename:

Date of Birth: Gender:

Home Address:

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Town:

County:

Postcode:

Siblings in School (If any):

Full Name:

Year and Registration Group:

Parents or Carers who have legal responsibility to the child

Parent/Carer:

1. Mr / Mrs / Ms / Miss / Dr / Other: Relationship:

Forename: Surname:

Address (If different to child):

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.....

Parent/Carer:

2. Mr / Mrs / Ms / Miss / Dr / Other: Relationship:

Forename: Surname:

Address (If different to child):

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Parent/Carer living at an address different to the child who wishes to receive:
(Please tick where appropriate)

Student Report:

Other correspondence:

Text messages:

Relationship to child:

Please indicate where Parent serves in the Armed Forces:

Mother

Father

Contact Information:

Please note the Academy Text Messaging Service uses the primary number of the first contact.

Daytime Emergency Contacts:

First Contact: Name: Relationship:

 Home:

 Mobile:

 Work/Other:

 Email address:

Second Contact: Name: Relationship:

 Home:

 Mobile:

 Work/Other:

 Email address:

Third Contact: Name: Relationship:

 Home:

 Mobile:

 Work/Other:

 Email address:

Fourth Contact: Name: Relationship:

 Home:

 Mobile:

 Work/Other:

 Email address:

Medical information:

Medical Conditions: (e.g. asthma, epilepsy etc)

Please add any further information, including medication your child takes long term.

Medical Practice:

Address:

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Town:

County:

Postcode:

Dinner Arrangements: (Tick appropriate)

Home School dinner Packed lunch

Please tick if eligible for free school meal

Travel to School: (Tick appropriate)

School Bus Public Bus Walk Car/Van Taxi Train

Cycle Car Share (with child/children) Bus (type not known) Other

Ethnic Background:
(Based on the national population Census ethnic categories).

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture, ancestry or family history. Ethnic background is not the same as nationality or country of birth.

The Information Commissioner (formerly the Data Protection Register) recommends that young people over 11 years old have the opportunity to decide their own ethnic identity. Parents of those with parental responsibility are asked to support or advise those children aged over 11 in making this decision, wherever necessary. Students 16 or over can make this decision for themselves.

Please select an ethnicity below to indicate the ethnic background of the student or child named above. Please also sign to indicate whether the form was filled in by a Parent/Carer or the child.

White British		Pakistani	
White Irish		Bangladeshi	
White and Black African		Any Other Mixed Background	
White and Asian		Any Other Asian Background	
White and Black Caribbean		Chinese	
Any Other White Background		Black African	
Traveller or Irish Heritage		Black Caribbean	
Gypsy/Roma		Any Other Black Background	
Indian		Any Other Ethnic Group	
I do not wish an ethnic background category to be recorded			

Country of Birth:

Nationality:

Home Religion:

Home Language:

First Language:

English as Additional Language: Yes/No

This information was provided by:

Parent/Carer Signature

Or

Student Signature

Any information you provide will be used solely to compile statistics on the school careers and experiences of students from different ethnic backgrounds, to help ensure that all students have the opportunity to fulfil their potential. These statistics will not allow individual students to be identified. From time to time the information will be passed to the Local Education Authority and the Department for Education and Skills (DCSF) to contribute to local and national statistics. The information will also be passed on to future schools to save it having to be asked for again.



Dear Parent/Carer

Parent/Carer Permission for Photographs, Video

As a safeguarding measure all students will be photographed on entry into the academy for Cashless Catering and an Identity Badge.

Periodically students may be photographed, recorded on video or asked if their photographs etc. may either be published in the press or used on the academy website. If the students are following some GCSE courses it may also be necessary to video them as part of the evidence for the examination. The Academy is advised that it should seek the permission of Parents/Carers for this to occur. Therefore could you please complete the information below to indicate whether you are prepared to allow photographs or videos to be taken of your son/daughter, which may be either used in the Academy or released to the press to celebrate the success of the student.

Yours sincerely

Carol Kitson
CEO/Executive Principal

Student Name: _____

Year and Form: _____

I hereby give permission for photographs/videos, in which the above named student may appear, to be stored for examination purposes, released to the press, or used on the Academy's website to celebrate their academic/sporting success.

Signed: _____ (Parent/Carer)

Print: _____



Dear Parent/Carer

Parent/Carer Consent for Fixtures and Sporting Events

During your child's time at Lightcliffe Academy in Year's 7-11, they may be asked to participate in off-site sporting events, fixtures, competitions or performances.

In order for Lightcliffe Academy to ensure the health and safety of your child whilst taking part in Sporting Events, we ask that you complete the below information to cover the duration of your child's time at Lightcliffe Academy.

Without this consent, your child will not be able to participate in any of these off site activities.

I agree that (student name) _____

- Can participate in sporting events and off-site physical activities whilst at Lightcliffe Academy and I understand they will be issued with full details prior to every fixture/event
- Can be transported in the school minibus or private coach if necessary
- Is in good health and fit to participate in the activities described
- Can receive First Aid treatment if required

I will ensure that if any of the information given changes i.e. contacts/medical conditions, I will inform the school.

I acknowledge the need for the student named above to behave responsibly and agree to the Academy's procedures in this regard.

Signed: _____ (Parent/Carer)

Print: _____

[@LightcliffePE](https://twitter.com/LightcliffePE)

