



**Dashwood  
Banbury  
Academy**

# ADMISSION FORM

Please complete all sections. The details given will form your child's computerised school record. As part of your child's school records it will be passed to the next school they attend.

If you require any help completing this form, please speak to Ruth Jakeman, Academy Business Manager.

**Completion of this form does not guarantee a place for your child.**

**If you are applying for Nursery please indicate if this is 2 year old  or 3/4 year old Nursery**

*Once in our 2 year old nursery, you will not need to reapply for 3/4 nursery but you will need to apply for Reception places through the Oxfordshire County Council when the time comes.*

## Section 1 Child's Details

Forename:	Middle Name(s):
Legal Surname:	Preferred Surname:
Date of Birth (dd/mm/yy)	MALE / FEMALE
<input type="checkbox"/> Copy of birth certificate seen	
Address: _____ _____	
Home telephone No: _____	
If your child has a sibling at this school already, please provide their names:	

## Section 2 Contact Details

First Contact Mr / Mrs / Miss / Ms Name: _____ Relationship: _____ <input type="checkbox"/> Has Parental Responsibility	Address & Post Code (if different to above):  Mobile No: _____ Day/Work No: _____ Email address: _____
Second Contact Mr / Mrs / Miss / Ms Name: _____ Relationship: _____ <input type="checkbox"/> Has Parental Responsibility	Address & Post Code (if different to above):  Mobile No: _____ Day/Work No: _____ Email address: _____
Third Contact Mr / Mrs / Miss / Ms Name: _____ Relationship: _____	Address and Post Code:  Home No: _____ Mobile No: _____ Day/Work No: _____

### Section 3 School History / Eligibility

**For 2 year old Nursery Only:** Is your child entitled to a funded place Y / N (please circle)

If yes, please bring your postcard to the school office.

Please give details of all previous settings attended by your child – if any.

Name of school or pre-school setting: _____	
Address: _____	Post code: _____
Date of arrival: __ / __ / __	Date of leaving __ / __ / __
Reason for leaving: _____	
_____	
Name of school or pre-school setting: _____	
Address: _____	Post code: _____
Date of arrival: __ / __ / __	Date of leaving __ / __ / __
Reason for leaving: _____	

### Section 4 Dietary Restrictions / Food Allergies

Is there any food or drink your child is unable to have for medical or religious reasons? YES / NO If 'YES' please state: _____
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### Section 5 Medical Information (Additional notes can be attached if appropriate)

Name / address of Doctor _____
_____
Telephone No: _____
Is there any medical condition the school should be aware of? YES / NO
If 'YES' please give details: _____
_____
_____
In the event of your child needing emergency medical attention we will do our outmost to contact you. If we cannot make this contact it may be necessary to seek medical advice for your child. Please tick the box if you give us permission to do so. <input type="checkbox"/>

### Section 6 Special Educational Needs

Are you aware of any learning or behavioural difficulty that your child experiences that will need special assistance within the school? YES / NO
If 'YES' please give a brief description of the type of help your child may need:

### Section 7 Travel Arrangements – we promote a healthy lifestyle at Dashwood Banbury Academy

Please state by which means your child generally travels to school:

Walks  Car  Bicycle  Taxi  Bus

## Section 8 Ethnicity Monitoring / Cultural

Please tick the ethnic group to which your child belongs. Please note that this question is not about citizenship or nationality, it is essential that we have this information so that we can monitor the effectiveness of the school's equal opportunities policies and practices in maximising your child's progress and achievement.

White British should include any pupils from England, Scotland, Wales and Northern Ireland. White Irish should include any pupils from the republic of Ireland.

- |  |   |
|--|---|
| <input type="checkbox"/> Bangladeshi                 | <input type="checkbox"/> White - British              |
| <input type="checkbox"/> Black - African             | <input type="checkbox"/> White - Irish                |
| <input type="checkbox"/> Black - Caribbean           | <input type="checkbox"/> White and Asian              |
| <input type="checkbox"/> Chinese                     | <input type="checkbox"/> White and Black African      |
| <input type="checkbox"/> Gypsy/Roma                  | <input type="checkbox"/> White and Black Caribbean    |
| <input type="checkbox"/> Indian                      | <input type="checkbox"/> Any other Asian background * |
| <input type="checkbox"/> Pakistani                   | <input type="checkbox"/> Any other black background*  |
| <input type="checkbox"/> Traveller of Irish heritage | <input type="checkbox"/> Any other mixed background*  |
| <input type="checkbox"/> Any other white background* | <input type="checkbox"/> Any other ethnic group*      |

\* Please specify:

Country of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Entry to the UK (if applicable): \_\_\_\_\_

Please write down the first language your child used or uses. If your child used more than one language, a language other than English should be recorded.

Language: \_\_\_\_\_

Please state your child's religion, if you wish: \_\_\_\_\_

## Section 9 Permission for Local Visit, Internet Use and Photography

By signing this form you give permission for your child to:

- Take part in short visits off the school premises, covered by the school's insurance. Permission will be sort for visits outside of Banbury.
- Have access to the internet to complete ICT curriculum. Our network is filtered to prevent access to most inappropriate sites and no child is allowed to use the internet without supervision.
- Have their photographs taken whilst in school for use in the classroom, school's prospectus, social media, website and local paper. Please state limitations below if appropriate:

## Section 10 Additional Funding

Families claiming Income Support, Income Based Jobseeker's Allowance, Immigration & Asylum Act, Child Tax Credits (not Working Tax credit) or Guaranteed Element of State Pension Credits are entitled to extra funding in school. Please complete the details below to enable us to keep our records accurate and to run relevant checks. If your child is eligible, we will contact you directly.

Parent/Guardian Full Name: \_\_\_\_\_

Parent/Guardian Date of Birth: \_\_\_\_\_

National Insurance No: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_