

New Delaval Primary School

Application Form

Year 1 to Year 6

New Delaval Primary School – Application Form

Child's Surname
Child's First names(s)
Chosen Name/Known as name
Address
Postcode
Date of birthGender (M/F)
First Language (spoken at home)
Any other language spoken
Name of previous school/Playgroup/Nursery
Attended fromDate left
Reason for Leaving
2. PARENT/GUARDIAN DETAILS
Please give details of all persons who have parental responsibility and place them in order you wish them to be contacted in an emergency. *Delete as appropriate
1 st Contact
Name & Date of Birth
National insurance number
Relationship
Occupation
Mobile number
Email Address
Home address is different from above
Home telephone number

Yes/No*

Parental responsibility

2 nd CONTACT	
Name & Date of Birth	
National insurance number	
Relationship	
Occupation	
Mobile number	
Email Address	
Home address if different from above	
Home telephone number	
Parental responsibility	Yes/No*
3rd CONTACT	
Name & Date of Birth	
National insurance number	
Relationship	
Occupation	
Mobile number	
Email Address	
Home address if different from above	
Home telephone number	
Parental responsibility	Yes/No*
4 th CONTACT	
Name & Date of Birth	
National insurance number	
Relationship	
Occupation	
Mobile number	
Email Address	
Home address if different from above	
Home telephone number	
Parental responsibility	Yes/No*

3. ADDITIONAL DETAILS - SIBLINGS AT SCHOOL

below. Please note a sibling is defined as a child of the family, sharing a parent by birth or adoption or living at the same address at the time of the application.
Sibling's Full Name and Date of Birth
Sibling's Full Name and Date of Birth
Sibling's Full Name and Date of Birth
4. MEDICAL DETAILS
Name of DoctorTelephone Number
Name and Address of Surgery
Important-Please give details below of any medical conditions
Do you receive Disability Living Allowance (DLA) for your child Yes/No
Name of DentistTelephone Number
Name and Address of Surgery
•

If your child has a sibling attending New Delaval Primary School, please give details

5. TRAVEL AND MEAL ARRANGEMENTS/DIETARY NEEDS

Please tick appropriate box

Travel	Meal	Dietary	
Bicycle	Free School	None	
	Meal		
Car	Home	Artificial Colouring Allergy	
Public Transport	School Meal	No Diary Produce	
Walk	Packed Lunch	Gluten Free	
Taxi	Other	Kosher Foods Only	
Other		No Nuts Of Any Type	
		No Pork	
		Ramadan	
		Seafood Allergy	
		Vegetarian	

	6. CULTURAL	INFORMATION	从来学家有意识的 。	
4位,自身自己,是这种的意思的,就是他们就是他们的,但是这个人,但是这个人的,我们就是这些人的,但是这个人的,也不是这个人,也是这个人的。""我们的,我们就是这				

Please study the list below and tick one box only to indicate the ethnic background of your child.

White- British/European		Black – Caribbean heritage	Arabic
Black – African Heritage		Black - other	
Indian		Pakistani	
Bangladeshi		Chinese	
Any other minority group			
(please specify)	•••••••		
Signed Parent/Guardiar	1		
Date			

For School Use Only

Year Group	UPN	Admission Date	Initials and Date



New Delaval Primary Uniform

Nursery	- Year 4	
Option 1	Option 2	
White shirt or Polo top	White shirt or Polo top	
Bottle Green Round Neck	Bottle Green Round neck	
Sweatshirt	sweatshirt or cardigan	
Grey/black trousers	Grey/black trousers or skirt	
Grey/black knee length shorts	Checked gingham green dress	
(summer)	(summer)	
Black shoes	Black shoes	
Years !	5 and 6	
Option 1	Option 2	
White shirt or Polo top	White shirt or Polo top	
Tie	Tie	
(optional for Year 5)	(optional for Year 5)	
V Neck Sweatshirt	V Neck sweatshirt or cardigan	
Grey/black trousers	Grey/black trousers or skirt	
Grey/black knee length shorts	Checked gingham green dress	
(summer)	(summer)	
Black shoes	Black shoes	
P.E	Kit	
Option 1	Option 2	
White T shirt	White T shirt	
Black shorts	Black shorts	
Plimsolls/Sandshoes	Plimsolls/Sandshoes	
Black jogging bottoms	Black jogging bottoms	
Black hoodie/fleece	Black hoodie/fleece	
Trainers for outdoor P.E	Trainers for outdoor P.E	

Please note once in school all pupils must also have a change of shoes for indoors.

All uniform must be clearly marked with your child's name

New Delaval Primary operates a no jewellery policy, with the

exception of a wrist watch. Earrings cannot be worn.

All uniform can be purchased from our local supplier

Cloud 9 Leisure, Cramlington
www.cloud9leisure.net
Unit 59F
South Nelson Industrial Estate,
Cramlington
NE23 1WF

Phone:01670 739370/Mobile 07876066202

Email: cloud9leisure@hotmail.com

House Colours/Logos

Milburn	Robson	Charlton	Gallagher

Resilience
Empathy
Self-Awareness
Positivity
Excellence
Communication



Delaval Gardens New Delaval Blyth Northumberland NE24 4DA

Head Teacher: Mr P Struthers BA (Hons) Telephone: 01670 353255

Email: school/admin@newdelavalprimary.co.uk
Website: www.newdelaval.northumberland.sch.uk

Dear Parent/Carer

Teamwork

During their time at New Delaval our pupils often go on a number of school visits. For each of these visits we ask for parental consent. On occasions we are finding it is very time consuming obtaining consent from the very few forms that are not returned to school.

We also ask for parental consent to use photographs of pupils on relevant occasions such as in newspaper articles, the school brochure, school displays or on the school website. Again, it often takes up much time contacting parents to get this consent.

In addition to this we also require parental consent for pupils to access the internet in school. We have an Internet Access Policy which details the measures we take to protect our children from inadvertently viewing any unsuitable material on the internet —this is available on request for parents to view. Our pupils also annually complete a refresher activity to promote safe use of the internet.

We are proposing that parents are now asked to complete a general blanket consent form which gives permission for your child to take part in all three of the above during their time at New Delaval. Teachers will still inform you in writing to advise you of dates and details of visits. All visits will continue to be conducted following strict health and safety guidelines including risk assessment and simple consent forms may be required where a voluntary contribution is requested. We do urge you to contact the school if you have any concerns about the details of any visit.

I can appreciate that many of you have already kindly completed and returned the old style forms to school, however all parents/carers must complete this new one for our records.

We would really appreciate your support with this matter and ask that you complete and return the below 'blanket' consent slip to school as soon as possible. If there is an activity you do not wish your child to take part in then please tick or circle the relevant section below. If forms are not returned to school we will assume you do not wish your child to participate in any of the above. You must notify school if circumstances change.

School reserves the right to retain photographs that may represent historical events in our school archives.

Thank you for your co-operation

Mr P Struthers Headteacher

'Blanket' Consent for School Visits, Photographs and Internet use

I give my permission for my child	Class	to:	
 attend local school visits; Such as walks in the local area, visits to other schools, visits to the sports centre, visits to other lo travel on a fully seat belted bus with qualified driver. 	cal establishments (eg churches	s, sheltered accommodation).	These visits may includ
 be included in photographs linked to school; We aim not to use individual pupil names in photographs wherever possible - please let us know if you sfor parental consent to use photographs of pupils on relevant occasions such as in newspaper articles. 			
Use the internet in school Internet usage in the school is carefully monitored and a filtering system is in place			
Signed(Parer	nt/Carer) Date		











Resilience
Empathy
Self-Awareness
Positivity
Excellence
Communication

Teamwork



Delaval Gardens New Delaval Blyth Northumberland NE24 4DA

Head Teacher: Mr P Struthers BA (Hons) Telephone: 01670 353255

Email: admin@newdelaval.northumberland.sch.uk Website: www.newdelaval.northumberland.sch.uk

Dear Parent/Carers

Our first priority is to keep our pupils safe. Therefore we have to be certain that we are handing children over to the correct person at 3.15pm. We would be grateful if you were to list the full names and contact phone numbers of ALL of the **adults** who you authorise to collect your child from school.

Name of child	Year group
Name (s) of parent/carer	

	Name(s)	Contact phone number	Relationship to child
1			
2			
3			
4			
5			
6			

Yours sincerely

my Stuth

Mr P Struthers Headteacher













