



New Delaval Primary School

Application Form

2yr Unit



New Delaval Primary School
Early Years/KS1 and KS2 Admission Form



New Delaval Primary School – Application Form

1. CHILD'S DETAILS

Child's Surname.....

Child's First names(s).....

Chosen Name/Known as name.....

Address.....

.....Postcode.....

Date of birth.....Gender (M/F).....

First Language (spoken at home)

Any other language spoken

Name of previous school/Playgroup/Nursery

Attended from.....Date 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	
Parental responsibility	Yes/No*

2nd 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*

4th 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

If your child has a sibling attending New Delaval Primary School, please give details 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 Dentist.....Telephone Number.....

Name and Address of Surgery.....

5. TRAVEL AND MEAL ARRANGEMENTS/DIETARY NEEDS

Please tick appropriate box

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

			Vegetarian	
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Nappy Cream:

- ☐ I give consent for the application of nappy cream (zinc and castor oil)
- ☐ I do not give consent for the application of nappy cream
- ☐ I will provide a suitable nappy cream

Sun cream:

- ☐ I give consent for the application of sun cream
- ☐ I do not give consent for the application of sun cream

Photographs:

- ☐ I give consent for the taking of photographs
- ☐ I do not give consent for the taking of photographs

Photographs will be used in the building for display purposes and your child's personal file

- ☐ I give consent for the use of photographs in the children's newsletter and school website
- ☐ I do not give permission for the use of photographs in the children's newsletter and school website

Toilet

- ☐ Is your child toilet trained Y/N
- ☐ Is your child still in nappies Y/N

In the unlikely event of your child not having the own nappies and wipes do you give consent for us to use the preschool spare nappies and wipes Y/N

If you do need to use our nappies do you agree to replace them Y/N

If your child is not yet toilet trained how can we support yourself and your child through the toilet training process?



6. CULTURAL INFORMATION

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 | ☐ | | | |

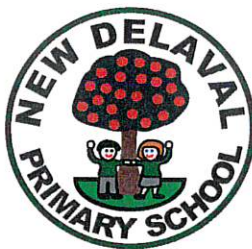
(please specify).....

Signed Parent/Guardian.....

Date.....

For School Use Only

Year Group	UPN	Admission Date	Initials and Date



New Delaval Primary Uniform

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

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



Northumberland

County Council

Details required to claim Funded Entitlements, Early Years Pupil Premium and Disability Access Fund.

Please complete as clearly as possible.

Child's Legal Family Name:		Child's Legal FULL Forename(s):	
Name by which the child is known (if different from above):			
Date of Birth:		Male/Female:	
Nationality:			
Address:		Post Code:	
Documentary proof of DoB Type (e.g. Birth Certificate, Passport):		Document recorded by (name of staff member):	
Date document recorded (dd/mm/yyyy):			
Parents Date of Birth: (dd/mm/yyyy):		Parents Surname:	
Parent/Carer National Insurance Number/NASS Number:		If applicable- Working families 11-digit eligibility code: (e.g. 12345678912)	



Northumberland

County Council

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Data Protection

Northumberland County Council takes privacy seriously and will only use the personal data provided as part of this form to administer and provide the School Readiness Passport and associated services. This is an opt in process and you are legally entitled to withdraw your consent or exercise your individual rights at any time. You can opt out at any point by contacting: Earlyyearsteam@northumberland.gov.uk.

More information about how Northumberland County Council processes your personal data can be found in the [Northumberland School Readiness Passport privacy notice](#):

Declaration:

I (Name)

of (Address)

confirm that the information I have provided above is accurate and true. I understand and agree the following:

1. I have read, noted and understood the information provided to me as part of this document.
2. I understand and agree to the conditions set out in this document and I authorise (Name of Provider/s) to claim free entitlement funding as agreed above on behalf of my child.
3. I understand and agree that my information will be processed by Northumberland County Council in accordance with the UK GDPR and UK Data Protection Act and that I can withdraw my consent or exercise any of my individual rights at any time.
1. I understand and agree that the information I have provided can be shared with the Authority and Department for Education, who will access information from other government departments to confirm my child's eligibility and enable this provider to claim Early Years Pupil Premium (EYPP) or Disability Access Fund (DAF) on behalf of my child.

Parent/Carer/Guardian with legal responsibility		Childcare Provider	
Signed		Signed	
Print Name		Print Name	
Date		Date	



Department
for Education

Free childcare entitlements parental declaration form

Step 1 – Your child's details

Child's Surname(s):	
Child Forename(s):	
Name by which the child is known (if different from above):	
Date of Birth:	
Gender:	
Address:	
Postcode:	

Your chosen provider will need to see proof of your child's date of birth.

Please tick which document you will provide with this form:

☐ Birth Certificate	☐ Passport
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Step 2 – Your details (parents/carers)

Parent / Carer 1	Parent / Carer 2
Surname:	Surname:
Forename:	Forename:
Date of Birth:	Date of Birth:
NI or NASS Number:	NI or NASS Number:

Step 3: Your child's eligibility

To be completed with assistance from your chosen provider(s) if needed.

☐ 2-year-old application (for disadvantaged children) Further information: https://www.gov.uk/help-with-childcare-costs/free-childcare-2-year-olds	☐ Working parent entitlement for children from the age of 9 months and above application Further information: https://educationhub.blog.gov.uk/2023/04/14/how-to-apply-for-30-hours-free-childcare-and-find-out-if-youre-eligible/
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Disadvantaged 2-year-olds are eligible for 15 hours of free early years provision if their parents meet the eligibility criteria. All 3- and 4-year-olds are entitled to 570 hours a year (universal entitlement) and some 3- and 4-year-olds from working families may be entitled to an additional 570 hours (30 hours entitlement) a year. The free childcare available will be extended to eligible working parents of children from the age of 9 months:

- From April 2024, the 15-hour entitlement for children aged 2 years of eligible working parents
- From September 2024, the 15-hour entitlement for children from the age of 9 months of eligible working parents
- From September 2025, the 30-hour entitlement for children from the age of 9 months of eligible working parents

If your child is receiving the free entitlement and is receiving child Disability Living Allowance, they are eligible for the Disability Access Fund (DAF).

Is your child eligible for and in receipt of Disability Living Allowance (DLA)?

☐ Yes	☐ No
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Step 4: Document check

Documentary proof of Dob Type (e.g. birth certificate, Passport):	
Document recorded by (name of staff member):	
Date document recorded (dd/mm/yyyy):	
Eligibility code: (e.g. 12345678912)	
2-year old eligibility code (if eligible):	

Step 5: Setting and attendance details

You need to agree and complete this declaration form with each setting your child attends for their free entitlement in order to ensure that funding is paid fairly to each of them.

Your child can attend a maximum of two sites in a single day and if your child attends more than one setting we will distribute the funding appropriately between the settings.

My child is attending the following settings:

Setting Name(s)	Please enter total free entitlement hours attended per day					Total number of hours per week	Number of weeks per year (e.g. 38, 45, 51)
	Mon	Tue	Wed	Thur	Fri		
A							
B							
C							
Total Daily Free Hours Attended							

If your child is splitting their free entitlement across two or more settings please nominate the main setting where the local authority should pay the DAF:

.....

Step 6: Parent/Carer/Guardian with legal responsibility declaration

Declaration: I (name)

of (address)

confirm that the information I have provided above is accurate and true. I understand and agree to the conditions set out in this document and I authorise (Name of Provider/s)

to claim free entitlement funding as agreed above on behalf of my child.

Parent/Carer/Guardian with legal responsibility	Childcare provider
Signed:	Signed:
Print name:	Print name:
Date:	Date:

In collecting your data for the purposes of checking your eligibility for the free entitlements, Early Years Pupil Premium (EYPP) or Disability Access Fund (DAF) (see notes 1 – 3), [NAME OF LOCAL AUTHORITY] is exercising the function of a government department.

[NAME OF LOCAL AUTHORITY] is authorised to collect this data pursuant to Section 13 of the Childcare Act 2006. Please note that from April 2024 2-year-olds will qualify for DAF and EYPP, and under 2's will qualify from September 2024.

Data privacy

The Data Protection Act 2018 (the Act) puts in place certain safeguards regarding the use of personal data by organisations, including the Department for Education, local authorities, schools and other early education providers. The Act gives rights to those about whom data is held (known as data subjects); such as pupils, their parents and teachers. This includes:

- The right to know the types of data being held
- Why it is being held; and
- To whom it may be disclosed

Should you have any concerns relating to how your information or the information relating to your child/ren is being or will be used, please contact your provider or [NAME OF LOCAL AUTHORITY]. Please note that information about whether a child is in receipt of Disability Living Allowance is, under the Act, Special Category Data which should be handled appropriately.

Providers are asked to pay particular note to advice from the Information Commissioner's Office on holding personal data including sensitive personal data available at: <https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/training-videos/handling-more-sensitive-information/>

This form is now complete



Frequently Asked Questions

Why use an online system?

Hand writing observations, printing out photos, cutting out and sticking all of these into a paper book is very time consuming. By taking photos and videos that can be instantly uploaded this increases the time that staff can spend with your children, supporting their learning.

We were also impressed with the way in which parents can instantly see what their child has been up to and can also share it with family members such as grandparents.

How do I get onto the system?

If you consent to us using Tapestry for your child, school will set up an account for you and provide you with log on details.

Tapestry can be accessed online at: <https://tapestryjournal.com>

It is available as a free app from the Apple Store and also on Android devices.

We will ask you to provide us with an email address so that we can set you up a personal account. This will be a secure way of logging in, and you will only be able to see your own child's book.

I don't have a computer, laptop, tablet or smartphone. How can I access Tapestry?

If you are unable to access the Internet on any device at home, then you will still be able to access your child's book by arranging a mutually convenient time with your child's teacher / key person to come into school. You will be provided with access to your child's account and support if needed.

I am not very confident with computers or the Internet. How can I access Tapestry?

One of the reasons for us choosing Tapestry was ease of use. It is a very easy system to use, but should you have any problems, a member of the Early Years Team will be happy to support you.

Why do you need my email address?

Your email address is required in order to set you up with access to your child's account. It is to ensure security on the site and also so that we can email you when a new entry has been added for your child.



Tapestry – An Online Learning Journal
Permission Slip

Child's First name:

Childs Last name:

Date of Birth:

Class (please circle): Preschool/Nursery / Reception

(please circle):

- **I do/ do not** give permission for an online Tapestry Learning Journey to be created and maintained for my child.

(please circle):

- **I do/ do not** give permission for my child's photo to appear in any group photos used in Learning Journeys.
- **I agree** not to electronically share, by social media or other platforms, any part of my child's Learning Journey.

The email address I wish to use for my Tapestry account is (please write in capitals):

Users first name: _____

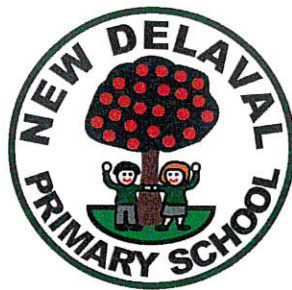
Users surname _____

Parent/Carer signature: _____

Date: _____

Please return this slip to your child's teacher or key worker as soon as possible.

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: school_admin@newdelavalprimary.co.uk
Website: www.newdelaval.northumberland.sch.uk

Dear Parent/Carer

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 local establishments (eg churches, sheltered accommodation). These visits may include travel on a fully seat belted bus with qualified driver.

- be included in photographs linked to school;

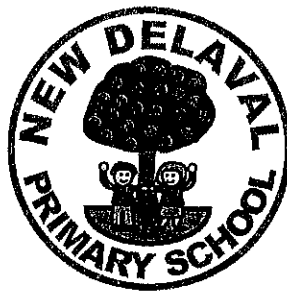
We aim not to use individual pupil names in photographs wherever possible – please let us know if you specifically do not want your child's name to be used with any photograph. We also ask for parental consent to use photographs of pupils on relevant occasions such as in newspaper articles, the school brochure, school displays or on the school website.

- Use the internet in school

Internet usage in the school is carefully monitored and a filtering system is in place

Signed _____ (Parent/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: school_admin@newdelavalprimary.co.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

Mr P Struthers
Headteacher



Artemark
Silver Award
Awarded by Arts
Council England



NPQH Leadership
Development School
National College
for School Leadership

