



St Joseph's Catholic Primary School & Nursery

Forms

**Our family at St Joseph's Learns, Loves &
Grows with God at the Centre.**





Getting to Know Your Child

We are delighted to welcome your child to St Joseph's. Please complete the table below so we can get to know your child better.

We look forward to working with you to support and enrich your child's academic growth. Thank you for completing this form.

Name of child:	
Date of birth:	
Which year will your child be entering?	
What name does your child prefer to go by? (For your child's name card)	
Family details: (Does your child have any siblings? Are they older or younger?)	
What is your child's first language?	
What is your (the main carer's) first language?	
What languages can your child understand?	
What languages can your child speak?	



Getting to Know Your Child

A chance to let us know about your child's hobbies, likes, and needs.

What does your child enjoy doing?	
How does your child express himself/herself best — through art, speaking, writing, music, etc.?	
What are your child's interests?	
Do you have any particular worries or concerns?	
Does your child have any special needs or do you have concerns regarding any speech, language, toileting, or other issues?	
Does your child have medical issues that we should be aware of – allergies, asthma, etc?	
Within the family do the parents / main carers have any medical issues that require support from your child?	
Are there any other adults other than immediate family living at home, i.e. aunts, uncles? (please give details)	
Is your child adopted, fostered or privately fostered (looked after by an adult who is not immediate family, i.e. grandparent, aunty, uncle, etc)	
Does your child have access to a computer and internet at home for homework assignments?	
Is there anything else you would like to tell us about your child?	



Child Collection / Pick Up Authorisation

As a school we have a duty of care to your child, which includes having the contact details of parents or other people close to the child that may be used for communication purposes when time is a factor. This includes getting in touch with a pupil's contacts for reasons such as emergency situations, illness or injury, and school closures. There is also a legal requirement for us to have the emergency contact details of a parent as part of our

register.

Sometimes it is not possible to make contact with a parent and therefore we are asking for **a minimum of four** emergency contacts (**including parents / carers**) for each of our pupils. These can be any family or friends that you would let pick up your child in an emergency. We ask that you seek permission from the person before sharing their contact details with the school and direct them to our privacy notice on our school website. The first contacts should be parents / carers. All must have different phone numbers.

Emergency Contact 1 Name (should be parent/carer):	<u>Relationship to child:</u>
<u>Telephone Number(s):</u>	<u>Email address (if appropriate):</u>
<u>Address:</u>	

Emergency Contact 2 Name:	<u>Relationship to child:</u>
<u>Telephone Number(s):</u>	<u>Email address (if appropriate):</u>
<u>Address:</u>	

Emergency Contact 3 Name:	<u>Relationship to child:</u>
<u>Telephone Number(s):</u>	<u>Email address (if appropriate):</u>
<u>Address:</u>	

Emergency Contact 4 Name:	<u>Relationship to child:</u>
<u>Telephone Number(s):</u>	<u>Email address (if appropriate):</u>
<u>Address:</u>	

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Parent / Carer Consent Form

Regular Out of School Activities

I hereby agree to my child participating in standard activities off the school site and within walking distance, during the school day (8:55 am - 3:15 pm). Such trips include environmental studies, libraries, shops, parks, swimming, sporting fixtures, and joint activities with other schools.

I understand that:

- My specific permission will be sought for any out-of-school activities beyond those outlined above and which could involve commitment to extended journeys or times, expense, or adventure activities.
- All reasonable care will be taken of my child in respect of the activity/visit.
- My child will be under an obligation to obey all directions given and observe all rules and regulations governing the visit/activity and will be subject to all normal school discipline procedures during the visit/activity.
- I will inform the school in writing of any medical condition or physical disabilities now, and/or as and when they arise and also advise the school if I do not wish my child to participate in local visits.
- I consent to any necessary medical treatment being given to my child in the event of an accident or illness. I authorise a member of staff to sign the necessary consent forms for such treatment on my behalf.
- I will not hold the Executive Head, Head of School, or any adult member of the party responsible for any loss during such visit of any personal effects (including money) or injury incurred by my child where reasonable steps have been taken to safeguard them.

If you change your mind at any time, you can let us know by emailing office@st-josephs.islington.sch.uk, calling the school on 0207 272 1270, or just popping in to the school office. If you have any other questions, please get in touch.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Individual and Class Photographs

Twice a year we invite Churchbury Photographic Services Ltd to take photographs of the children – individual photos in the Autumn term and individual and Class photos in the Summer term. The photos are then made available to the school for the Pupil Management Information System for educational and safeguarding purposes and for parents to purchase on the Churchbury website.

For parents, purchasing the photographs has been a popular and valuable service which we would like to continue to offer. In order to do so, we need your consent to securely share children's full names and pupil identification numbers, allow Churchbury to take photos of your child, and upload the photos to their private website in order to transfer them to St Joseph's for use within our own computer system. If you're not happy for us to do this, that's no problem – we will accommodate your preferences.

- I give consent for Churchbury to take photos of my child. This includes consent for Churchbury to upload these photographs to its secure website where I can login to view and purchase them. This is also consent for the school to share full names and pupil identification numbers with Churchbury for administrative purposes to facilitate purchasing.

- I am **NOT** happy for Churchbury to take or have photos of my child.
 - Without this consent, your child will not be in class photos and you will not be able to order any school photos of your child.

If you change your mind at any time, you can let us know by emailing office@st-josephs.islington.sch.uk, calling the school 02072721270, or just popping in to the school office. This form will be kept on record in your child's confidential file.

If you have any other questions, please get in touch.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Photographing and videoing of school events

We will invite you to assemblies, class masses, prayer services and other special events and we understand that some parents and carers would like to capture these moments in photographs and/or videos.

However, we must ensure that we protect and safeguard all children and staff, including those who do not want to have their images stored online.

- Once posted and shared online any image or video can be copied by anyone.
- Some children are at risk and MUST NOT have their image put online. Due to Safeguarding restrictions, not even all members of our school community will know who these children are and therefore may not give permission for children to be photographed.
- Some people do not want their images online for personal or religious reasons.
- Some children and staff may have a complex family background which means that sharing their image online can have unforeseen consequences.

Therefore, please be aware that parents are not permitted to take photographs or to make a video recording for their own personal use during any school events.

We will endeavour, where appropriate, to provide an opportunity at the end of some events for you to photograph your child.

Thank you for your understanding and support.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Photographs, Videos and St Joseph's Website

We take photographs and videos of the children at work and play. These are used as teaching tools and assessment evidence and are displayed around our school and on our school website. We also may on occasion use photographs for marketing purposes in local newspapers.

We need your consent to take photos of your child and use them for marketing purposes. Please note that there are instances where we do not require parental consent for usage of children's photos. These include, but are not limited to:

- Pupil photos on our school's Management Information System
- Medical purposes (i.e. for catering staff to know about any specific allergies children may have)
- Photos in classrooms which are used to aid learning and celebrate achievements

Consent for Photographs and Videos	Tick (√)
I am happy for photos and videos of my child to be used on the school website.	
I am happy for photos and videos of my child to be used in the school leaflets/prospectus.	
I am happy for photos and videos of my child to be used in internal displays (i.e. corridors).	
I am happy for photos and videos of my child to be used on the St. Joseph's Twitter account.	
I am happy for photos and videos of my child to be used for marketing purposes in local newspapers or for special events.	
I am NOT happy for the school to take or use photos or videos of my child.	

If you change your mind at any time, you can let us know by emailing office@st-josephs.islington.sch.uk, calling the school on 0207 272 1270, or just popping in to the school office. If you have any other questions, please get in touch.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Consent for Using Contact Details

We would like your consent for some of the ways we use your information to contact you. We will contact you using your home and mobile phone numbers (including by text message), email address and postal address.

We use ParentPay as our communication and payment platform, so we must share your child's name with ParentPay in order to facilitate setting up an account with them, where you will decide which contact information ParentPay has. This enables us to:

- Keep you up to date with what's happening at school
- Let you know about extra-curricular activities on offer for your child
- Allow you to contribute for the School Fund, trips, and other school events and items
- Allow you to pay for fees for after school and enrichment clubs or ad-hoc items

If you do not give consent for ParentPay, we can try our best to keep you up to date, but you may miss out on important events and last-minute messages and will have to make all payments through the school office.

I give consent for the school to share my child's name with ParentPay:

Yes

No

Please tick the relevant box(es) below for consent about other contact needs:

Use of parents' contact details	Tick (✓)
I am happy for the school to use my contact details to send me messages on behalf of the PFA.	<input type="checkbox"/>
I am happy for the school to use my contact details to contact me about fundraising activities.	<input type="checkbox"/>
I am happy for the school to contact me on behalf of external providers about events and clubs.	<input type="checkbox"/>
I am NOT happy for the school to use my /my child's personal data in the ways set out above.	<input type="checkbox"/>

If you change your mind at any time, you can let us know by emailing office@st-josephs.islington.sch.uk, calling the school on 0207 272 1270, or just popping in to the school office. If you have any other questions, please get in touch.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Consent for Using Medical Information

We would like your consent for some of the ways we store and share medical information about your child. We'd like to:

- Share information about your child with health professionals coming in to school, for example to do dental or eye checks.
- Take information such as height and weight for public health monitoring initiatives.

This makes it easier for us all to keep your child healthy. However, if you're not happy for us to use information in the ways we list below, that's no problem – we will accommodate your preferences.

Use of information for medical purposes	Tick (✓)
I am happy for the school to share information such as my child's height and weight with the NHS.	
I am happy for the school to share information such as my child's height and weight with the local authority.	
I am happy for the school to share information about my child (e.g., name) with health professionals doing dental and eye checks.	
I am NOT happy for the school to use and share medical information in these ways.	

If you change your mind at any time, you can let us know by emailing office@st-josephs.islington.sch.uk, calling the school on 0207 272 1270, or just popping in to the school office. If you have any other questions, please get in touch.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Medical Form

Child's First Name:

Surname:

Class:

Known Medical Conditions or Allergies:

Health Care Plan in place? Yes / No

Attached

Name of Child's GP: _____ GP's telephone no: _____

Name and address of GP's office:

Any prescription medicines will need to have a Daily Medicine Film filled out. Please come to the office to complete this form or we WILL NOT be able to give your child any medicine. The prescription must need to be administered 4 times a day.

Non-prescription medicine can never be given to children by staff members.

If possible, please bring a daily dose for your child so that you will not have to collect the medicine at the end of every day.



Ethnic Monitoring Form

The information you provide will be used anonymously to compile statistics on the school population of Islington for the Department for Education in order to get a true picture of the different ethnic backgrounds within the borough. If you do not want us to record this information about your child, please sign below.

If this information relates to more than one child you have at this school, please write their name(s) and their class(es) below:

_____	_____
_____	_____

What is your child's home language: _____

What is your child's first language: _____

What is your child's country of birth: _____

What is your child's nationality: _____

I do not wish to provide this information on my child for the Department for Education.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____

PLEASE TICK ONLY ONE OF THE FOLLOWING BOXES

✓	Ethnicity	✓	Ethnicity	
<u>British White</u>	English (WENG)	<u>Black Other</u>	Black European (BEUR)	
	Scottish (WSCO)		Black North American (BNAM)	
	Welsh (WWEL)		Black Other (BOTB)	
	Other White British (WOWB)		Any Other Black Background (BOTH)	
<u>Other White</u>	Albanian (WALB)	<u>Chinese</u>	Chinese (CHNE)	
	Bosnian-Herzegovinian (WBOS)		Hong Kong Chinese (CHKC)	
	Croatian (WCRO)		Malaysian Chinese (CMAL)	
	Greek (WGRK)		Singaporean Chinese (CSNG)	
	Greek Cypriot (WGRG)		Taiwanese (CTWN)	
	Greek / Greek Cypriot (WGRE)		Other Chinese (COCH)	
	Gypsy / Roma (WROM)	<u>Mixed Ethnicity</u>	White & Black Caribbean (MWBC)	
	Irish (WIRI)		White & Black African (MWBA)	
	Kosovan (WKOS)		White & Asian (MWAS)	
	Italian (WITA)		Any Other Mixed Background (MOTH)	
	Portuguese (WPOR)		White & Pakistani (MWAP)	
	Serbian/Yugoslavian (WSER)		White & Indian (MWAI)	
	Traveller of Irish heritage (WIRT)		White & any other asian background (MWAO)	
	White Eastern European (WEEU)		White & Chinese (MWCH)	
	White European (WEUR)		White & any other background (MWOE)	
	White Western European (WWEU)		Asian & Black (MABL)	
	Other White (WOTW)		Asian & Chinese (MACH)	
	Any Other White Background (WOTH)		Asian & any other background (MAOE)	
	<u>Turkish (3)</u>		Turkish (WTUK)	Black & Chinese (MBCH)
			Turkish Cypriot (WTUC)	Black & any other background (MBOE)
Turkish / Turkish Cypriot (WTUR)		Chinese & any other background (MCOE)		
<u>Kurdish</u>	Kurdish (OKRD)	Other mixed (MOTM)		
<u>Bangladeshi</u>	Bangladeshi (ABAN)	<u>Other Ethnic Group</u>	Afghanistani (OAFG)	
<u>Other Asian</u>	African Asian (AAFR)		Arab Other (OARA)	
	Indian (AIND)		Egyptian (OEGY)	
	Kashmiri Other (AKAO)		Filipino (OFIL)	
	Nepali (ANEP)		Iranian (OIRN)	
	Pakistani: Unspecified (APKN)		Iraqi (OIRQ)	
	Pakistani: Kashmiri (AKPA)		Japanese (OJPN)	
	Pakistani: Mirpuri (AMPK)		Korean (OKOR)	
	Pakistani: Other (AOPK)		Libyan (OLIB)	
	Sinhalese (ASNL)		Latin/South/Central America (OLAM)	
	Sri Lankan Tamil (ASLT)		Lebanese (OLEB)	
Other Asian (AOTA)	Malay (OMAL)			
Any Other Asian Background (AOTH)	Moroccan (OMRC)			
<u>Black Caribbean</u>	Black Caribbean (BCRB)		Polynesian (OPOL)	
<u>Black African Somali</u>	Somali (BSOM)		Thai (OTHA)	
<u>Other Black African</u>	Angolan (BANN)		Vietnamese (OVIE)	
	Congolese (BCON)	Yemini (OYEM)		
	Ghanaian (BGHA)	Other Ethnic Group (OEG)		
	Nigerian (BNGN)	Any Other Ethnic Group (OOTH)		
	Sierra Leonian (BSLN)	<u>Unknown</u>	Refused to Say (REFU)	
	Sudanese (BSUD)		Information Not Obtained (NOBT)	
	African: Unspecified (BAFR)			
	Other Black African (BAOF)			

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



School Library Agreement

Agreement

- I understand that I have the right to borrow a School Library book
- I understand that I have the responsibility to look after my school library book and return it in the same condition as it was borrowed.
- I agree to inform the Librarian if I have lost or damaged a school book.
- I agree to replace or pay the £5.00 replacement fee for any book that I have damaged or lost.
- I understand that if I do not agree to the Library Agreement I will not be able to use the school library facility.



Signed: _____ Child

Signed: _____ Parent

IMPORTANT NOTICE

Lost, stolen or damaged books must be replaced or a £5.00 fee paid before another book can be taken out the library.



Home School Agreement

School's Commitment

We at St Joseph's acknowledge our responsibility to support parents in nurturing their children towards human wholeness within a Catholic community and therefore undertake to:

- Provide a safe welcoming, friendly environment for children and parents.
- Expect all staff and children to treat each other with care and respect.
- Demonstrate our Faith and our school's foundation in the teachings of Jesus Christ by what we teach and the way we live and worship in our school.
- Challenge and encourage all children to strive for the highest standard of personal, social and intellectual development and to aim for excellence in all that they do.
- Provide a well-planned and balanced curriculum.
- Provide parents with information about their child's progress through regular meetings with teachers and an annual report.
- Inform parents of any concerns regarding their child's behaviour, work or health.



Home School Agreement

Parent's Commitment

I/We acknowledge that as parents / guardians, we are the primary educators of our children, and have an irreplaceable role to play in supporting our children at school.

I/We undertake to:

- Support the school's aims and policies and the Christian values of the school community.
- Expect all parents/guardians to treat each other, children and members of staff with care and respect.
- Ensure that our child comes to school on time each day and that the school is informed of any absence.
- Ensure that our child brings to school everything needed for the day, and wears the correct uniform.
- Encourage our child to work hard and behave well, showing respect to teachers, their fellow pupils and the school environment and materials.
- Support our child with their homework and foster an enthusiasm for learning.
- Attend meetings arranged to discuss our child's progress and the work of the school.

Signed: _____ **Child**

Signed: _____ **Parent**



Extended School

APPLICATION FORM

Please note that this does not guarantee a space on the Extended School Club as it is dependent on availability.

Child's Name: _____ Class _____

Email address: _____

Contact Telephone Number: _____

Please tick the following boxes.

I have children who already attend After School Club.

I am going back to work or to study.

My child has special needs or a disability.

Please tick this box if your joint family income is lower than £24,000 to be eligible for application at a discounted rate.

Please tick boxes relevant to you:

I am interested in applying for a Breakfast Club place at St. Josephs from 7:30 am at a cost of £5 per session. (No sibling concession)

Please circle required days

MON TUE WED THURS FRI

I am interested in applying for an After School Club place at St. Josephs which runs from 3:15 pm until 6:00 pm at a cost of £12 per session. (Sibling concession £10)

Please circle required days

MON TUE WED THURS FRI

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Free School Meals

Nursery and Primary children

Islington is one of the few councils in England to offer free school meals for all nursery and primary pupils.

Registering will raise money for your child's school

It is important to sign up for free school meals online as registering could raise an **extra £1,320** for St. Joseph's Primary School from central government to fund valuable support like extra tuition, teaching assistants or after school clubs. If you do not register, St. Joseph's may not receive this extra funding from Islington Council.

To register for your child, please complete the simple on-line form.

<https://www.islington.gov.uk/children-and-families/benefits-and-financial-support/free-school-meals-and-uniform-grant>

Because of funding cuts, it is very important that you complete the form ONLINE.

It would be beneficial to the school if parents who choose not to take up the opportunity of a Free Meal and would like to remain on packed lunches still complete the form.

It is extremely important that you complete this online form to help make sure St. Joseph's is as well funded as possible.

I confirm that I have completed the ON-LINE FORM

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



St Joseph's School Building Fund

What is this Fund?

St Joseph's School is blessed with outstanding facilities in a wonderful location. We are committed to ensuring that our classrooms and outdoor areas continue to be as safe and modern as possible to support your children's learning.

St Joseph's is a Voluntary Aided (VA) school, which means that our grounds and buildings are only partly funded by the Local Education Authority. The government requires all Catholic and other faith schools in England to provide 10% of these costs.

There are many demands and priorities for the school building and grounds and the more parent contributors we receive, the more we can do to enhance the school facilities for your child.

This means that for 2020/21, we must raise more than ever before, and **so we do ask and expect that every family makes a contribution to our School Building Fund**. We are asking every family to make a commitment to the School each year with a contribution of at least £60 (a minimum of £120 if two or more children attend the school).

What have we achieved in the past 5 years?

- We have created our amazing Library which is amongst the best in Islington.
- The School entrance and reception area have been revitalised.
- We created a state of the art outside learning area for our Early Years children and now have a show stopping zone for all our Nursery and Reception children.
- We have renovated and modernised the school kitchen.
- We have also repaired the school wall boundary and fences.
- Rebuilt the Early Years toilets to create a fresh and colourful zone.

What's Next?

This year, we would like to provide better sports equipment and maintain and update the playground areas by developing a MUGA pitch, including a multi-purpose building. Every pound you give will be carefully spent on selected improvements.

How can you help?

£60 a year equates to only £1.15 a week.

Payment can be made by a variety of means:

1. **By ParentPay (preferred method)**
2. **By cheque** payable to St Joseph's Primary School. Please write your child's name and class on the back.
3. **By cash** direct to the school office or transition meeting
4. **By Standing Order – see the attached form.**
5. **By bank transfer to:**

Bank: Barclays Bank Plc

A/C Name: St Joseph's Catholic Primary School – School Fund Account

A/C No: 73309789

Sort Code: 20-00-00

Please include your child's full name as reference.

If you would prefer to pay in instalments, please do let us know. We will be happy to assist you with this.

If you pay UK tax (on wages, salaries, self-employed earnings or any other income) please **Gift Aid your contribution** and boost it by 25p of Gift Aid from the government for every £1 you donate. Your £60 becomes £75 at no cost to you!

We want to continue to provide an outstanding education for your child. Your contribution to the school is essential to help us do this. If you need any help with this or have any queries, you are most welcome to contact the School Office to arrange a meeting with a member of the Senior Leadership Team.

We thank you in advance for your contribution.

I confirm that I have paid the School Building Fund donation by:

ParentPay / Cheque / Cash / Standing Order / Direct by Bank transfer

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____



Standing Order Mandate

To: Your Bank Manager:
Bank/Building Society:

Bank/Building Society Address:

Sort Code: Account Number:

Account Holder Name(s):

Address:

Payment Reference Number
Your Child's full name:

Please Debit £

<p>Monthly <input type="checkbox"/></p> <p>On the of each Month</p> <p>4 Weekly <input type="checkbox"/></p> <p>Starting on until this instruction is cancelled</p>	<p>Weekly <input type="checkbox"/></p> <p>Mon/Tue/Wed/Thur/Fri each week</p> <p>Fortnightly <input type="checkbox"/></p> <p>Starting on until this instruction is cancelled</p>
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Signed:

For Bank Use Only
Please credit payments to:
St Joseph's Catholic Primary School ,
School Fund Account,
Barclays Bank,
1 Churchill Place, London E14 5HP

Sort Code 20-00-00	Account No 73309789
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This order supersedes any current instruction



Charity Gift Aid Declaration – Multiple Donations

Boost your donation by 25p of Gift Aid for every £1 you donate.

Gift Aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer.

In order to Gift Aid your donation you must complete the line below:

I want to Gift Aid my donation of £ _____ and any donations I make in the future or have made in the past 4 years to:

Name of Charity: St Joseph's Catholic Primary School

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

My Details:

Title _____ First name or initial(s) _____

Surname _____

Full Home address _____

Postcode _____ Date _____

Please notify the charity if you:

- want to cancel this declaration
- change your name or home address
- no longer pay sufficient tax on your income and/or capital gains

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code

GENERAL DATA PROTECTION REGULATIONS (GDPR)

To comply with new EU Data Protection Regulations we must obtain consent in order for us to be able to hold and use some of your data. We hold addresses, donor bank details, and financial records, all of which are needed by the Charity to comply with Trustees and Charity Commission reporting requirements and for claiming Gift Aid from HMRC.

Records are held on computer with password protection. We hold secure paper records of donor Gift Aid forms. We use email addresses to keep people informed of Charity activities and for mailing purposes. We keep a record of consents.

I give my consent for my information being held and used in this manner.

Parent / Carer's Signature: _____ Date: _____

Parent / Carer's Name: _____