

Speedwell Nursery School

Confidential Essential Information and Consents

OFFICE USE:

Birth certificate seen ☐

Start date

Class

Session

Liquid Logic ☐

Child's Forename/s: Surname:.....

Known as.....

☐ Male

☐ Female

Date of Birth

Address

..... Post Code:

Telephone Email address:

Name of Carer NI number..... Occupation

Name of Carer NI number Occupation

Position in family e.g. 1 of 2..... Who has Parental Responsibility?

Names and ages of brothers and sisters

Country of Birth Pupil Nationality.....

Languages spoken at home If more than, 1 which is the main?

Languages read at home Religion

Mode of travel to/from school (e.g. walk/car/car share/bus)

Ethnic Origin				
White-British	White & Black Caribbean	Indian	Black-Caribbean	Chinese
White Eastern European	White & Black African	Pakistani	Black African	Somali
Middle Eastern	White & Asian	Bangladeshi	Any other black background	Any other ethnic group
Any other white background	Any other mixed background	Any other Asian background	Traveller	Others, Please specify

Emergency contact numbers:

Telephone number

Relationship to child

Name

1.

2.

3.

In the unlikely event of an accident, attempts will always be made to contact someone from the list.

Please supply details of those who will be collecting your child from Nursery, together with a photograph. This is to ensure that your child is as safe as possible whilst in our care. ***We would ask that children under 16 years do not collect.*** A phone call at the beginning or before the end of the session is required if usual collection arrangements are to be altered. Please note: it will also be necessary to give an identifying password if anyone different is to collect.

Title Mr/Mrs/Miss/Ms/Other Name: Address: Home telephone: Mobile telephone: Work telephone: Work address: Relationship to child	
Title Mr/Mrs/Miss/Ms/Other Name: Address: Home telephone: Mobile telephone: Work telephone: Work address: Relationship to child	
Title Mr/Mrs/Miss/Ms/Other Name: Address: Home telephone: Mobile telephone: Work telephone: Work address: Relationship to child	
Is there anyone who should <u>not</u> collect your child?	please attach a photo if available

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Name of Social Worker/Family Support Worker/Early Help worker/BDP worker:.....

Contact Telephone Number.....

Is your child subject to any court order Y/ N Please give details.....

Is your child on a Child Protection Plan Y/N for what reason.....

Is your child a 'Child in Need' Y/N

Is your child in the care of the local authority or any other person Y/N.....

Name of Doctor Tel:.....

Name of DentistTel.....

Name of Health Visitor..... Tel.....

Please give details of any current medical conditions, medication, treatments or allergies being experienced by your child.
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.....

If yes please ask your child's key person for a medication form.

Please indicate if your child has had the following health checks in the last 12 months:

Hearing Y/N

Sight Y/N

Glasses worn Y/N

Speech Y/N Is your child being seen by a speech and language therapist? Y/N

Name of therapist?.....

Development Y/N

Does your child have any dietary requirements?.....

Is your child vegetarian? Y/N

Has your child participated in a Portage Programme? Y/N

Have you participated in activities from a Family support Centre Y/N

Which groups have you attended and where?

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SHARING INFORMATION & CONSENT

The member of staff working with you and your child will discuss with you what information is held on your child/family, why it is held and why it is shared with other agencies. That person will be pleased to discuss any issues or concerns you have about this agreement or you may write to the Headteacher.

I understand that if I am providing personal information about other people it is my responsibility to inform them of the information included in this declaration.

I am the parent/carer of the child named on the registration form or hold Parental Responsibility for him/her. I understand and agree that the information I have provided, including information on activities and events attended, will be held and managed securely by Bristol City Council, in line with the new General Data Protection Rules.

Speedwell Nursery staff are bound by protocols regarding confidentiality.

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.

Please tick below if you give your consent to:	TICK ✓
Your child receiving emergency medical treatment at the hospital, if we have been unable to contact you and it has been necessary to call an ambulance	
I consent to my child using the internet and have seen a copy of the E-Safety Policy for more information	
I consent to the school using my contact details to contact me via text message, email, phone call or letter	
I consent for the school to share my contact details with other professionals including other schools, health services, voluntary organizations and other professionals in the interests of safeguarding children.	
I consent for the school to pass my details onto the primary school for which we are a 'feeder' school so that they can contact me with information about their school	
I give consent to use the Tapestry (Interactive Learning Diary) programme capturing details about my child's learning whilst they are attending nursery classes.	
I am NOT happy for the school to use my personal data in the ways set out above	
I consent to not using a mobile phone when in the setting premises for my personal use. This is for the protection of other children and adults around me.	
I consent to my child travelling in staff cars with appropriate child seats.	
I consent to members of staff applying factor 50 sun cream to my child when necessary.	
I consent to my child walking to local areas of interest e.g. the shops/letterbox/park.	
I consent to my child taking part in face painting activities.	
I consent to my child travelling by walking/car/minibus to Forest School,	
I consent to members of staff applying to Sudocrem to my child when necessary.	
Signed Date.....	

If you change your mind at any time about these permissions, you can let us know by emailing speedwell.n@bristol-schools.uk, calling the school on 0117 9030329 or popping into the school office.

It is very important that these details are up to date, please contact the office if any of these details change, *especially if you change your phone number*. Thank you.

Photograph Consent Form

Speedwell Nursery School operates a Photograph Policy which has been agreed by Governors and Staff. Copies of this are available to read on the website and upon request at the Reception areas. Speedwell Nursery School uses photography to capture children's learning and achievement and use this within personalised learning diaries for each child and displays. Some photographs capturing school and family support events with expressed permission are also used on our face book pages which are managed by SLT members.

Please Tick ✓ if you give your consent to:

	Tick ✓
I consent to my child's photograph being used to compile their interactive learning diary (Tapestry)	
I consent to my child's group photograph being used to compile other children's interactive learning diaries.	
I consent to my child's individual photograph being taken in the setting and displayed around the organisation .	
I consent to my child's photograph being shared on the web site and Facebook pages managed by senior leaders.	
I consent to my child's photograph being shared on an end of year slide show.	
I consent to my child's photograph being shared in the press and in educational documentation.	
I consent to my child being photographed for student's use on placement	
I am NOT happy for the school to use my child's photograph in the ways set out above	

If you change your mind at any time about these permissions, you can let us know by emailing speedwell.n@bristol-schools.uk, calling the school on 0117 9030329 or popping into the school office.

Parent/Carer Consent **Date**.....