



**Ormiston
Sudbury
Academy**

Reply Booklet
In-Year Admissions
2024-2025

Thank you.

Student Name: _____

Current School: _____



**ORMISTON SUDBURY ACADEMY
STUDENT EMERGENCY CONTACT DETAILS**

PLEASE COMPLETE IN BLOCK CAPITALS BOTH SIDES AND RETURN TO THE ACADEMY AS SOON AS POSSIBLE. IT IS EXTREMELY IMPORTANT THAT WE HAVE ACCURATE CONTACT INFORMATION FOR EACH STUDENT. PARENTS / CARERS ARE RESPONSIBLE FOR ENSURING THIS INFORMATION IS KEPT UP TO DATE AND ADVISING THE ACADEMY IN WRITING OF ANY CHANGES AND YOU HAVE SOUGHT APPROVAL FOR ADDITIONAL CONTACT INFORMATION. THANK YOU

STUDENT'S DETAILS

First Name: _____ Middle Name(s): _____
Legal Surname: _____ **Known-as** Surname: _____
 Date of Birth: _____ Gender: M / F / Other (please specify): _____
 Address: _____
 Postcode: _____
 Home Tel. Number (include STD code): _____
 Student Mobile 'phone number (If applicable): _____

Is the Student a 'Looked After Child'? YES/NO

PARENT(S)/CARER/OTHER EMERGENCY CONTACT DETAILS – Minimum requirement 2 Contacts

CONTACT 1

Title: Mr / Mrs / Ms / Miss
 Forename: _____ Surname: _____
 Address: _____
 Postcode: _____
 Tel. No: _____
 Mobile No: _____
 Relationship with Student: _____
 Place of Work: _____
 Work Place Tel. No: _____
Parent/Carer Signature: _____
 E-mail address: _____

CONTACT 2

Title: Mr / Mrs / Ms / Miss
 Forename: _____ Surname: _____
 Address: _____
 Postcode: _____
 Tel. No: _____
 Mobile No: _____
 Relationship with Student: _____
 Place of Work: _____
 Work Place Tel. No: _____
Parent/Carer Signature: _____
 E-mail address: _____

Email addresses are required for you to access the SIMS Parent app and INTOUCH communication system

CONTACT 3

Title: Mr/Mrs/Ms/Miss
 Forename: _____ Surname: _____
 Address: _____
 Postcode: _____
 Tel. No: _____
 Mobile No: _____
 Relationship with Student: _____
 Place of Work: _____
 Work Place Tel. No: _____

CONTACT 4

Title: Mr/Mrs/Ms/Miss
 Forename: _____ Surname: _____
 Address: _____
 Postcode: _____
 Tel. No: _____
 Mobile No: _____
 Relationship with Student: _____
 Place of Work: _____
 Work Place Tel. No: _____

Usual meal Arrangements: Academy dinner / Packed lunch / Free School Meal (please circle as appropriate)

STUDENT'S MEDICAL DETAILS

Doctors Surgery Name: _____ Telephone Number: _____

Asthmatic? Yes/No **Diabetic?** Yes/No **Any history of Anaphylactic reaction (Nuts/Bee stings)?** Yes/No

Further details of this, or any other medical condition/illness, physical need, disability or dietary requirements of which the Academy should be aware of:

Usual mode of transport to Academy: Walk / Cycle / Car / Public transport / Taxi (please circle as appropriate)

The Academy is required, *for statistical purposes only*, to hold details of students' Ethnicity, Religious Beliefs and Language(s) spoken. Please could we ask you to help us in this by providing answers to the following questions:
(PLEASE ANSWER ALL 6 QUESTIONS)

1. What is the Student's Ethnicity? (Please tick in the most appropriate box):

Our ethnic group describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture, ancestry or family history. Ethnic group is not the same as nationality or country of birth.

The Information Commissioner (formerly the Data Protection Registrar) recommends that young people aged over 11 years old have the opportunity to decide their own ethnic identity. Parents or those with parental responsibility are asked to support or advise those children aged over 11 in making this decision, wherever necessary. Students aged 16 or over can make this decision for themselves.

Please study the list below and tick one box only to indicate the ethnic group of the student or child named overleaf. Please also tick whether a parent or the student filled in the form.

		(✓)			(✓)
White			Asian or Asian British		
	English			Indian	
	Irish			Pakistani	
	Traveller			Bangladeshi	
	Gypsy / Roma			Any other Asian ethnic group	
	Any other White ethnic group				
Mixed			Black or Black British		
	White and Black Caribbean			Caribbean	
	White and Black African			African	
	White and Asian		Any other Black ethnic group		
	Any other mixed ethnic group		Any other ethnic group		
I do not wish an ethnic group category to be recorded			Chinese		

Completed by (✓): Parent? ___ Student? ___ (Please tick one option)

2. What is the Student's Religion? (Please tick in the most appropriate box):

	(✓)		(✓)		(✓)		(✓)		(✓)		(✓)		(✓)
Buddhist		Christian		Muslim		Jewish		Hindu		No Religion		Refused	

3. What is the Student's First Language? (Please tick in the most appropriate box):

	(✓)		(✓)		(✓)
English		Other than English *		Refused	

* If other – please specify _____

4. What is the Student's Country of Birth? Please Specify: _____

Parent/Carer Signature (1): _____ Parent/Carer Signature (2): _____

Request for Locker

Student Name: _____

Please provide my son/daughter with a locker. I agree to the terms outlined in the information booklet, as at cost of **£10.00**. Replacement keys will be charged at £5. The payment will be made via a payment portal, as the Academy is cashless.

Parent/Carer signature: _____

Email and Internet – Technology Acceptable Use Agreement

Parents and Students: please complete and sign as your agreement to abide by our expectations (as per the Parent Information Booklet).

Student Name: _____ Year Group: _____

I have read and understood the Academy 'Technology Acceptable Use Agreement'. I will use all computer systems in a responsible way, and obey the rules at all times.

Student signature: _____ Date: _____

Parent/Carer's Consent for Internet Access

I have read and understood the Academy 'Technology Acceptable Use Agreement', and give permission for my son/daughter to access the Internet. I understand that the Academy will take all reasonable precautions to ensure students cannot access inappropriate materials. I understand that the Academy cannot be held responsible for the nature or content of materials accessed through the internet. I agree that the Academy is not liable for any damages arising from the use of internet facilities.

Parent/Carer Name: _____ Parent/Carer signature: _____

Date: _____

Cashless System – Cunninghams IPAY Portal

Parents: please complete and sign as your agreement for your son/daughter to be able to access the cashless system from September 2024.

All students in the Academy have their own unique PIN (Personal Identification Number). Students are reminded that they should not disclose their unique PIN to other users.

I hereby give consent that my son/daughter can be registered into the cashless system from September 2024.

A separate unique log in for online access will be sent to you in the new term.

Student name (PLEASE PRINT): _____

Parent/Carer Name (PLEASE PRINT): _____

Parent/Carer signature: _____

Please note that data will be shared with Vertas & Cunninghams in order to set up and maintain accounts

***** ✂ *****

LANGUAGES

Most students will study French from Year 7. In order for us to arrange suitable groups, please provide details of your son/daughter's existing knowledge of languages.

Student name: _____

- has not studied French at primary school.
- has studied ____ hours of French per week for ____ years.
- goes to France or any other French speaking country on a regular basis.
- is a native speaker of French*

- is a native speaker of _____ (please indicate language)*

* We may be able to enter your child early for a GCSE in their native language. Please contact the Academy if you wish to discuss this in more detail.

Parent/Carer signature: _____

Peripatetic Music Lessons

At Ormiston Sudbury Academy we offer our students the opportunity to have individual peripatetic music lessons in a variety of instruments, including:

Guitar, Drums, Piano and Singing

We would like to make you aware that these lessons would occur during our normal academic day, so students would most likely be expected to come out of their regular timetabled lesson to attend.

For **guidance**, the costs of these lessons (payable at the beginning of every half term in advance) for the 2023/2024 academic year are:

£105.00 for a 6 week half term (6 x 30 minute lessons)

or

£70.00 for a 6 week half term (6 x 20 minute lessons)

If your child is interested in peripatetic lessons when they join us, please complete the details below:

Student Name:

Current School:

Preferred Instrument:

Preferred Lesson Length:



Ormiston Sudbury Academy

Home Academy Agreement

Our Home Academy Agreement supports the education of students by strengthening the partnership between home and the Academy. It sets out what we can expect from each other, and what we each aim to do.

At Ormiston Sudbury Academy we will:

- Raise student aspiration and enable each student to achieve more than they believe possible;
- Provide a safe, caring environment in which students can learn effectively;
- Demonstrate clear expectations which are effectively supported through consistent and fair rewards and sanctions;
- Offer high quality learning in and out of the classroom, preparing students for a diverse range of futures;
- Respond to the individual needs of students within the Academy community;
- Prepare students for productive futures in their family, education, work and society;
- Maintain effective communication with home so that the daily experience of students can be followed and supported by their parents.

Signed: *Ormiston Sudbury Academy*

As Parents/Carers I/we agree to:

- Ensure regular attendance, unless my child is ill, and avoid unnecessary absence;
- Ensure my child arrives on time to the Academy;
- Inform the Academy promptly of the reason for absence, lateness or any other circumstances that may affect my child in the Academy;
- Provide my child with the correct uniform and equipment needed for learning;
- Monitor that independent study is being completed to a good standard and sign my child's planner each week;
- Uphold all academy rules and support the Academy in the reasonable rewarding and disciplining of my child;
- Maintain positive communication with the Academy in support of my child's progress;
- Attend all invitations to discuss the progress of my child.

By sending my child to Ormiston Sudbury, I am agreeing to support the values, ethos and all expectations of the Academy.

Parent/Carer signature: _____

Date: _____

Student Standards

Ormiston Sudbury Academy is a safe place to be. It is safe because there is mutual respect between staff and students and standards are met on a day to day basis, at all times. Maintaining these standards means that you and others will be safe and will be able to learn and progress to the best of your ability. The expectations we have of you, the student, are as follows:

At any time:

- Respond to any reasonable request by a member of staff the first time.
- Be polite and respectful to others, their opinions and beliefs.
- Expect to be, and ask to be, rewarded for good work, independent study, effort, participation, good attitude, punctuality and attendance.

We will model equally high standards as staff members. We will make sure you are safe and supervised. We will ensure you have access to outstanding teaching, healthy food and suitable advice, should you need it and support with learning and/or social and emotional matters.

With a positive attitude you will:

Personal presentation and preparation:

- **Attend** 100% of the time, arrive **on time** for registration and lessons, equipped with **pen, pencil, ruler, eraser and planner** as a minimum. Bring kit, ingredients or equipment as requested.
- Wear the **correct uniform**, to a high standard, using **appropriate language** in and around the Academy. **Walk** around the Academy in a sensible and orderly manner.
- Wear only **minimal make-up (no false eyelashes)** and maintain **natural hair colours**. Have **no facial piercings** other than ear studs. If you choose to wear nail polish, only wear one colour and keep it neatly maintained.

In lessons:

- Work where you are asked to and with whom you are asked. Be silent for the register and respond "Yes Sir" or "Yes Miss". **Record independent study** in your planner.
- **Drink only water** in teaching spaces. Ensure classrooms (and the Academy at all times) are left tidy and litter free.
- Follow our academy expectations, meet the OSA attributes and follow the **NOT SEEN, NOT HEARD** rule regarding mobile 'phones/devices.
- Give your work your best effort in all of your lessons, participating fully in all activities, being polite and respectful to others, their opinions and beliefs. Listen to others and do not shout out.

Student Name: _____

Student signature: _____

Date: _____

Photography and videos parental/carer consent form

Please read the consent form thoroughly and complete - stating what photography and videos you consent to us taking and publishing of your child.

Please tick either 'Yes' or 'No' for each criterion below:

I provide consent to:	Yes	No
Taking and using photographs and videos of my child on any managed and maintained school and/or sponsor websites.		
Taking and using photographs and videos of my child on social media, including, but not limited to, Facebook, Twitter, Instagram, LinkedIn.		
Taking and using photographs and videos on <i>internal</i> displays such as posters, screens, noticeboards or otherwise, that can only be seen by approved visitors, staff and pupils.		
Taking and using photographs and videos on <i>external</i> displays such as posters, screens, noticeboards or otherwise, that can be seen by members of the public.		
Taking and using photographs and videos of my child for promotional materials, such as prospectus, brochures, fliers or other materials.		
Taking and using photographs and videos of my child for use in local, regional and national media. This may include newspapers, TV, any respective websites and social media.		
Sharing my child's data with a school-appointed external photography company for official school photography. This includes the following: <ul style="list-style-type: none"> ▪ Name ▪ Class ▪ Roll number 		
Taking part in class or group photographs which will be available for sale to other families		

Refreshing your consent

This form is valid for the duration of time your child is at the school. It will only be refreshed where any changes to circumstances occur – this can include, but is not limited to, the following:

- New requirements for consent, e.g. an additional social media account will be used to share pupil photographs and videos.
- Changes to a pupil's circumstances, e.g. safeguarding requirements mean a pupil's photograph cannot be used.
- Changes to parental consent, e.g. amending the provisions for which consent has been provided.

Where you would like to amend the provisions for which consent has been provided, you must submit your request in writing to the **principal via the school office**. A new form will be supplied to you to amend your consent accordingly and provide a date and signature.

Withdrawing your consent

You have the right to withdraw your consent at any time. Withdrawing your consent will not affect the legality of processing images or videos that were shared prior to withdrawal; however, we will make every effort to remove images of the pupil where possible, e.g. images of the pupil on the school's website will be removed. If you would like to withdraw your consent, you must submit your request in writing to the **principal via the school office**.

Declaration

I understand:

- Why my consent is required.
- The reasons why the Academy may take and use photographs and videos my child.
- Which other organisations may take and use photographs and videos of my child.
- The conditions under which the school/sponsor uses photographs and videos of my child.
- I have provided my consent above as appropriate, and the school will take and use photographs and videos of my child in line with my requirements.
- Photographs and videos of my child will be kept only for the duration of their time at the school. Additional permission will be sought if required for a longer period e.g. alumni.
- I will be required to refresh consent where any circumstances change.
- I can withdraw my consent at any time and must do so in writing to the **Principal via the school office**

Please sign and date the consent form and return to the school office

I, ----- (name of parent/carer), understand.

Date and signature-----

If you have any questions regarding this form or need help understanding what it all means, or translating it, please do not hesitate to contact the school office on 01787 375131.