



## *Richmond Methodist School*

*“Doing all the good we can”*

Dear Parent/Carer,

Thank you for choosing Richmond Methodist School. Our school website contains lots of useful information about the school, its ethos, organisation and staffing. We hope you find it helpful.

Whether you are a visitor, parent/carer or pupil, we hope that you will find a warm welcome at Richmond Methodist School (RMS). We strive to ensure that pupils at RMS are happy and confident individuals with every child being recognised as a unique individual. We celebrate and welcome differences within our school community, adopting the Methodist inclusive approach of “for all”.

We strive to ensure that our pupils demonstrate Christian Values during their time in school and within the community. Specifically we focus on: generosity, compassion, courage, forgiveness, friendship, respect, thankfulness, trust, perseverance, justice, service and truthfulness. We use these values to support our teaching of the central British Values of: the rule of law, individual liberty, democracy, tolerance and mutual respect. We create a safe and secure environment where all may achieve their full potential and feel a sense of pride in their own achievements and the achievements of others.

We aim to build positive and collaborative relationships with children and their families. We are deeply committed to working with parents to help children achieve to the best of their ability and will seek to work in partnership from the very beginning of your child’s time here. We encourage all parents to talk to either the teaching staff or the Headteacher or Deputy Headteacher should they have any concerns relating to the education or well-being of their child.

To ensure we are aware of all important information regarding your child, it is essential we maintain up to date contact information and background information about your child. This information booklet must be completed prior to your child starting school and allows us to collect all necessary and relevant information. The information gathered will be stored securely in paper copy whilst your child is attending Richmond Methodist School and electronic information will be archived for a period of 5 years following the completion of Year 6. For full details of our data management procedures and privacy notice that comply with the GDPR (2018) please see our website or contact me directly.

However, the best way to learn about our school is to visit us and see for yourself. Please feel free to make an appointment with our school administrators if you would like to arrange a visit and have a tour of the school.

We look forward to meeting you in the near future.

Yours sincerely,

**Sharon Stevenson**

**Head Teacher**

# Personal Information Record and Consents

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**If you would like support completing this form please contact school.**

*This information booklet must be completed prior to your child starting school at **Richmond Methodist School** and allows us to collect all necessary and relevant information. The information gathered will be stored securely in paper copy whilst your child is attending **Richmond Methodist School** and electronic information will be archived for a period of 5 years following the completion of Year 6. For full details of our data management procedures and privacy notice that comply with the GDPR\* (2018) please contact school or see our school website.*

*\*GDPR is General Data Protection Regulation*

## DECLARATION

**Please read and sign the following declaration**

I declare that I the undersigned have parental responsibility for the named pupil and that I am therefore able to provide the information requested and that the information provided is accurate. I understand that it is essential for the school to have pertinent information to ensure the quality of care and safety for the pupil and that it is my responsibility to advise the school in writing of any changes in information as soon as reasonably possible.

I understand that all the information provided is used in line with Richmond Methodist School Privacy Notice.

**Signed:**

**Printed Name:**

**Date:**

***All data provided will be held in strictest confidence under the provisions of the GDPR 2018***

## THIS SECTION IS FOR BASIC INFORMATION REGARDING THE PUPIL

Please note legal parents are entitled to access information about their child unless there is a legal order in place.  
We will need to see documentary evidence to support this.

|                        |  |                       |  |
|------------------------|--|-----------------------|--|
| Child's Legal Forename |  | Child's Legal Surname |  |
| Preferred Forename     |  | Preferred Surname     |  |
| Middle Names           |  |                       |  |
| Date of Birth          |  | Gender                |  |
| Address                |  |                       |  |

**Please complete this section if your child has previously attended another school/preschool provision**

|                          |  |                       |  |
|--------------------------|--|-----------------------|--|
| Previous School Attended |  | Head Teacher          |  |
| Address                  |  | Attended from and to: |  |
| Reason for leaving       |  |                       |  |

|                          |  |                       |  |
|--------------------------|--|-----------------------|--|
| Previous School Attended |  | Head Teacher          |  |
| Address                  |  | Attended from and to: |  |
| Reason for leaving       |  |                       |  |

**PARENTAL DETAILS AND EMERGENCY CONTACTS 1 AND 2**

Please note a parent with parental responsibility is entitled to access information about their child unless there is a legal order in place.

We may require documentary evidence to support this if queries arise.

**If you wish to change this information, it is your responsibility to inform the school.**

|  |     |                              |   |
|--|-----|------------------------------|---|
| Parent/carer Title:  |     | Parent/carer's relationship: |   |
| Parent/carer Full Name   |     |                              |   |
| Parent/carer Full Address including postcode   |     |                              |   |
| Mobile number  |     | Home number                  |   |
| Work number  |     | Other                        |   |
| Email address – <b>We run a paperless system. Please provide your preferred email address for all correspondence</b> |     |                              |   |
| Does this person have full parental responsibility?  | YES | NO                           | Does this parent have residential care?<br>YES NO             |
| Is this parent a priority contact?   | YES | NO                           | Are there any legal orders in place re this parent?<br>YES NO |
| Is this parent a member of Her Majesty's Armed Forces?   | YES |                              | NO  |

|  |     |                              |   |     |    |
|--|-----|------------------------------|---|-----|----|
| Parent/carer's Title:  |     | Parent/carer's relationship: |   |     |    |
| Parent/carer's Full Name   |     |                              |   |     |    |
| Parent/carer's Full Address including postcode   |     |                              |   |     |    |
| Mobile number  |     |                              | Home number   |     |    |
| Work number  |     |                              | Is this parent a priority contact?                  | YES | NO |
| Email address - <b>We run a paperless system. Please provide your preferred email address for all correspondence</b> |     |                              |   |     |    |
| Does this person have full parental responsibility?  | YES | NO                           | Does this parent have residential care?             | YES | NO |
| Is this parent a priority contact?   | YES | NO                           | Are there any legal orders in place re this parent? | YES | NO |
| Is this parent a member of Her Majesty's Armed Forces?   |     |                              | YES   | NO  |    |

| <b>OTHER EMERGENCY CONTACT INFORMATION</b>  |                      |  |                       |  |  |
|---|----------------------|--|-----------------------|--|--|
| Please provide contact details for other people you would wish us to contact in emergency if we were unable to contact priority 1 and 2 |                      |  |                       |  |  |
| Contact priority number   | <b>3</b>             |  | Relationship to pupil |  |  |
| Contact's Title:  | Mr/Miss/Mrs/Ms/Other |  |                       |  |  |
| Contact's Full Name   |                      |  |                       |  |  |
| Contact's Full Address including postcode   |                      |  |                       |  |  |
| Mobile number   |                      |  | Home number           |  |  |
| Work number   |                      |  |                       |  |  |
| Contact priority number   | <b>4</b>             |  | Relationship to pupil |  |  |
| Contact's Title:  | Mr/Miss/Mrs/Ms/Other |  |                       |  |  |
| Contact's Full Name   |                      |  |                       |  |  |
| Contact's Full Address including postcode   |                      |  |                       |  |  |
| Mobile number   |                      |  | Home number           |  |  |
| Work number   |                      |  |                       |  |  |
|   |                      |  |                       |  |  |

## SCHOOL MEALS

At Richmond Methodist School, children have two options during the lunch period; school lunch or packed lunch. However, the vast majority of children opt for school dinners and we would encourage this.

School Meals are cooked daily on the premises and we operate a menu of choices. This means that children select their lunch choice from a given selection. Each day the lunch menu offers a range of foods including meat, vegetarian and cold options.

**Children in Reception, Year 1 and Year 2 are entitled to a free school meal as part of Universal Infant Free School Meals.**

A copy of the lunch menu is available on the school website [www.richmondmethodist.n-yorks.sch.uk](http://www.richmondmethodist.n-yorks.sch.uk).

We ask parents to pay lunch money in advance via ParentPay on a weekly, monthly or termly basis before a lunch is taken. (Any meals not taken are not charged for.)

### PACKED LUNCHES

Children may also have a packed lunch. This should be in a rigid plastic container or lunch box carrier and must be clearly marked with your child's name. We strongly request that no glass bottles, canned or fizzy drinks, sweets, nuts or chocolate are included in packed lunches.

### CHANGING LUNCH OPTIONS

If your child wishes to change from school lunch to packed lunch and vice versa they should inform their class teacher whilst the register is being taken.

## DIETARY NEEDS

- Artificial colouring allergy
- Gluten allergy
- Dairy allergy
- No nuts of any type/quantity
- Seafood allergy

- Halal
- Kosher Foods Only
- No pork
- Vegetarian
- Vegan

Other dietary information:

### Meal Arrangement Choice

Paid Meal

Free School Meal

Packed lunch

## FREE SCHOOL MEALS AND PUPIL PREMIUM

Registering for free school meals could raise an extra £1,320 for your child's school, to fund valuable support like extra tuition, additional teaching staff or after school activities.

This additional money is available from central government for every child whose parent is receiving one of the welfare benefits listed in the form. It is therefore important to sign up for free school meals, even if your child is in Reception, Year 1 or Year 2, so that your child's school receives as much funding as possible. If you would like more information and an application form please visit <https://www.northyorks.gov.uk/free-school-meals>. (Alternatively ask the school office to provide a paper copy.)

You can register your child for Free School Meals if you get any of these benefits:

- Income Support
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- The Guarantee element of State Pension Credit
- Child Tax Credit, provided they are not entitled to Working Tax Credit and have an annual income (as assessed by HM Revenue & Customs) that does not exceed £16,190
- Working Tax Credit 'run-on' - the payment someone may receive for a further four weeks after they stop qualifying for Working Tax Credit

If you don't want your child to have the school meals, they can continue their lunchtime routine as normal – as long as you qualify and are registered, the school still gets £1320 extra. No one will know you have registered and it will not affect any other benefits you are claiming.

# HEALTH

We are committed to making sure that school is a happy and successful experience for all of our children and young people. Where a child has a particular difficulty or need, we will do our best to put measures in place to overcome this. It would therefore be helpful if you could complete this questionnaire, whether or not your child has any difficulties.

We will treat what you have told us here sensitively. None of the information will be shared with other parents or pupils.

If you need help to answer any questions please let us know.

## What Happens To The Information You Give Us?

Information will be used by the school to promote the wellbeing of your child. No information will be published that would identify your child. Information will be shared with those staff in the school who support your child.

## MEDICAL PRACTICE INFORMATION

|                                  |  |
|----------------------------------|--|
| Name of Doctor/ Medical Practice |  |
|----------------------------------|--|

**1. Please indicate whether your child has any long standing illnesses, health problems or disabilities which mean that they have substantial difficulties with any of the areas of his/her life shown below. Please select all that apply. By long-standing we mean anything that has troubled them over a period of at least 12 months or that is likely to affect them over at least 12 months. Please exclude difficulties that you would expect for a child of that age**

|   | ✓ |
|---|---|
| Mobility – moving around indoors or outdoors                              |   |
| Hand movements – touching or holding                                      |   |
| Personal care – going to the toilet, dressing                             |   |
| Eating and drinking without help  |   |
| Incontinence – wetting or dirtying  |   |
| Taking medication   |   |
| Learning – numbers, letters, words  |   |
| Behaviour – very active, has a short attention span, behaves unacceptably |   |
| Has fits or seizures  |   |
| Diagnosed with autism or Asperger Syndrome                                |   |
| Has a life-limiting condition or requires palliative care                 |   |
| Can be depressed, or anxious, or has an eating disorder                   |   |

|  |     |    |
|--|-----|----|
| <b>2. Does your child take any medication, use any physical aids or require any special diet or supplements?</b>   | Yes | No |
| <b>3. If your child did not take this medication, use this physical aid or has a special diet or supplements, would he/she have substantial difficulties with any of the areas of life listed above?</b> | Yes | No |

## 4. Hearing

|  |     |    |
|--|-----|----|
| Has your child ever had their hearing tested?                          | Yes | No |
| What was the result?   |     |    |
| Does your child have a history of hearing difficulties/ear infections? | Yes | No |
| Does your child wear grommets?   | Yes | No |
| Does your child wear a hearing aid?                                    | Yes | No |

## 5. Vision

|  |     |    |
|--|-----|----|
| Has your child ever had their eyesight tested? | Yes | No |
| What was the result?                           |     |    |
| Does your child wear spectacles?               | Yes | No |

## 6. Asthma (please ask for a copy of the school asthma policy and procedures)

|   |     |    |
|---|-----|----|
| Does your child have Asthma?  | Yes | No |
| Do they need prescribed medication/inhaler to be kept in school for this? Please give details |     |    |
|   |     |    |

|  |   |    |
|--|---|----|
| <b>7. Allergies</b>  |   |    |
| <b>ALLERGIES eg Plasters, anti-septic wipes, bee / wasp stings</b> |   |    |
| <b>Please specify below:</b>                                       |   |    |
|  |   |    |
| Does your child need any medication for the any of the above?      | Yes/No (please delete) If yes please detail |    |
| Does your child have an Epi Pen for any of the above?              | Yes   | No |

|   |     |    |
|---|-----|----|
| <b>8. Speech and Language Development</b>                             |     |    |
| Does your child have any issues with speech and language development? | Yes | No |
| Have they ever been assessed by Speech and Language Therapy?          | Yes | No |
| What was the result?  |     |    |
|   |     |    |
| Does your child attend Speech Therapy?                                | Yes | No |

|  |     |    |
|--|-----|----|
| <b>9. Emergency First Aid</b>                                    |     |    |
| May we administer sticking plaster for minor first aid injuries? | Yes | No |

|   |  |                          |
|---|--|--------------------------|
| <b>10. Other Medical Information – if you tick any conditions below we will contact you for further information</b>                         |  | <b>√</b>                 |
| Epilepsy  |  | <input type="checkbox"/> |
| Diabetes  |  | <input type="checkbox"/> |
| Eczema  |  | <input type="checkbox"/> |
| ADHD  |  | <input type="checkbox"/> |
| ADD   |  | <input type="checkbox"/> |
| Coeliac Disease   |  | <input type="checkbox"/> |
| Cystic Fibrosis   |  | <input type="checkbox"/> |
| Other (Please Specify):   |  |                          |
|   |  |                          |
| Please use this space to inform of us any other medical information that you may feel is relevant but not covered by the earlier questions: |  |                          |
|   |  |                          |

|   |     |    |
|---|-----|----|
| <b>11. Other Information</b>  |     |    |
| Is your child under any medical treatment at present?   | Yes | No |
| Is your child being seen or assessed by any other agency or medical professional?   | Yes | No |
| Has your child ever had a serious accident?   | Yes | No |
| Is there anything else we need to know? Please give details   |     |    |
|   |     |    |
| Has your child ever experienced any emotional trauma? Describe briefly any traumatic events that your child has experienced (for example: death of close relative, divorce, family crisis, etc.)? | Yes | No |
|   |     |    |
| Is there anything else we need to know? Please give details   |     |    |
|   |     |    |

|  |     |    |
|--|-----|----|
| <b>12. Are your child's vaccinations up to date including tetanus:</b> | Yes | No |
|--|-----|----|

|  |
|--|
| <b>13. During summer months we ask children to wear sun cream that lasts with one application. Alternatively, your child may bring in a named bottle which they then apply themselves.</b> |
|--|

**Medication**

Please note children are not permitted to bring medication into school.

- All medication used in school must be delivered and signed in by an adult and a medicine authorisation form must be completed and signed by a parent and must comply with our school policy.
- Only prescribed medication in the original container can be dispensed if needed four times a day or at regular intervals – please ask at the school office for advice.
- All medicines can only be collected by an adult that has been nominated by the person with parental responsibility.

## GENERAL BACKGROUND INFORMATION

Please note that these are mandatory fields on our database, should you wish not answer please select the 'Information refused' option, so we can complete data entry.

|   |   |   |
|---|---|---|
| <b>Ethnicity</b><br><input type="checkbox"/> Any other Asian background<br><input type="checkbox"/> Any other black background<br><input type="checkbox"/> Any other ethnic group<br><input type="checkbox"/> Any other mixed background<br><input type="checkbox"/> Any other white background<br><input type="checkbox"/> Bangladeshi<br><input type="checkbox"/> Black African<br><input type="checkbox"/> Black Caribbean<br><input type="checkbox"/> Chinese<br><input type="checkbox"/> Gypsy | <input type="checkbox"/> Gypsy Roma<br><input type="checkbox"/> Indian<br><input type="checkbox"/> Pakistani<br><input type="checkbox"/> Roma<br><input type="checkbox"/> Traveller of Irish heritage<br><input type="checkbox"/> White British<br><input type="checkbox"/> White Irish<br><input type="checkbox"/> White and Asian<br><input type="checkbox"/> White and black African<br><input type="checkbox"/> White and black Caribbean | <input type="checkbox"/> Information Refused                |
| First Language spoken   |   | <input type="checkbox"/> Information refused                |
| Other Languages spoken/understood   |   | <input type="checkbox"/> Information Refused                |
| Is English an additional Language used by your child?   |   | <input type="checkbox"/> Information Refused                |
| Religion  |   | <input type="checkbox"/> Information refused                |
| National Identity   |   | <input type="checkbox"/> Information refused                |
| Country of Birth  |   | <input type="checkbox"/> Information refused                |
| Nationality   |   | <input type="checkbox"/> Information refused                |
| <b>In Care</b> Yes <input type="checkbox"/> No <input type="checkbox"/><br>Social Worker name:<br>Social Worker contact details:  | Foster Carer name:<br>Foster Carer contact details  | Special Guardian name:<br>Special Guardian contact details: |
| <b>Adoption</b> Yes <input type="checkbox"/> No <input type="checkbox"/><br>My child was adopted from care under the Adoption and Children Act 2002 or has left care under a Special Guardianship or Residence Order  |   | <input type="checkbox"/> Information refused                |
| <b>Service</b> Yes <input type="checkbox"/> No <input type="checkbox"/><br>My child has a parent/s who is a member of the armed forces or in receipt of a child pension from the Ministry of Defence.   |   | <input type="checkbox"/> Information refused                |
| <b>Mode of Transport (please choose one only ie the main one)</b>   | Car/Van<br>Car share (with another child)<br>Cycle  | Taxi<br>Walk<br>Bus   |



# PERMISSIONS AND CONSENTS FOR GENERAL ACTIVITIES IN SCHOOL



Consent on enrolment for normal,  
routine educational visits



## Educational visits during the school day which are part of the normal curriculum.

Schools are not required to obtain consent from parents for pupils to participate in off-site activities that take place during school hours and which are a normal part of a child's education, such as local studies and visits to a museum or library, swimming lessons etc. While parents do not have the option to withdraw their child from the school curriculum, it remains good practice to inform parents that a visit or activity is to take place

This school will inform you of any proposed educational visit of this sort by letter, text or e-mail.

## Educational visits beyond the school day or which are not a part of the normal curriculum

Educational visits beyond the school day or which are not part of the normal curriculum require consent. This consent for educational visits is given on enrolment for those visits which are not further afield, residential or include adventurous activities.

This school will inform you of any proposed educational visit of this sort by letter, text or e-mail.

For visits which are further afield, residential or include adventurous activities the school will request individual consent and where appropriate further medical information.

## Educational visits during the school day which are part of the normal curriculum.

|   |        |
|---|--------|
| I understand that I am not required to give consent for local educational visits during the school day which are part of the normal curriculum, but that I will be fully informed by the means described above. | Yes/No |
|---|--------|

## Educational visits beyond the school day or which are not a part of the normal curriculum

|  |        |
|--|--------|
| <ul style="list-style-type: none"> <li>▪ I give consent for my child to take part in local educational visits beyond the school day or which are not part of the normal curriculum. I understand that I will be fully informed by the means described above. Further afield, residential or adventurous visits will require separate consent.</li> </ul> | Yes/No |
|--|--------|

## Medical information and contact details

|  |        |
|--|--------|
| I understand that it is my responsibility to provide timely updated medical and contact details to the school. | Yes/No |
|--|--------|

## Medication

|  |        |
|--|--------|
| I understand that the Visit Leader may give the participant prescribed or non-prescribed medication for which I have given separate written consent and that I will be informed. | Yes/No |
|--|--------|

## Further information

|  |        |
|--|--------|
| I understand that I can request further information about administering medication, behaviour, charging and remissions, safeguarding and other relevant policies from the school or service. | Yes/No |
|--|--------|

## Consent

|  |               |
|--|---------------|
| Name of person giving consent and relationship | Name of child |
| Signature                                      | Date          |

## PERMISSIONS AND CONSENTS FOR GENERAL ACTIVITIES IN SCHOOL

| Please help us by completing <u>all</u> the boxes. All permissions will be active for the time the child is registered with the school and in the case of the use of images for 6 years after they have left. If you wish to change this information, it is your responsibility to inform the school.   | Permission granted       | Permission declined      |
|---|--------------------------|--------------------------|
| <b>RESPONSIBLE USE OF THE INTERNET</b><br>User Agreement<br>IT and the use of IT play an important role in children’s learning in school. As part of the school’s IT programme we offer pupils supervised access to the Internet and email. In order to reduce the risk of accidentally accessing inappropriate material, the school employs a filtering system that restricts access to inappropriate materials or undesirable sites. Whilst every endeavour is made to ensure suitable restrictions are in place we cannot be held responsible for the nature or content of all materials accessed through the Internet. The school has further details guiding Internet use and follows a safe code of conduct. The school also a comprehensive Safety On-line Policy.<br><br><i>I understand that my child will use the Internet at school. I understand that the school will take all reasonable precautions to ensure that my child does not gain access to inappropriate material. I have discussed this and my child agrees to follow the e-safety rules and to support the safe use of ICT at Richmond Methodist School.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Signed:</i>  |                          |                          |

## PERMISSIONS AND CONSENTS FOR GENERAL ACTIVITIES IN SCHOOL (continued)

| Please help us by completing <u>all</u> the boxes. All permissions will be active for the time the child is registered with the school and in the case of the use of images for 6 years after they have left. <b>If you wish to change this information, it is your responsibility to inform the school.</b>   | Permission granted       | Permission declined      |
|--|--------------------------|--------------------------|
| <b>USING IMAGES OF CHILDREN</b> (Your child’s image could be a photo or video)<br><br>From time to time the media asks us, usually following a publicised school event, to have photographs taken of pupils within school for publication in the local press or in other publications. Occasionally, their first names accompany the photograph. <b>Please note:</b> we will not release children’s surnames to the press without seeking further consent from you.<br><b>I give permission for my child’s image to be used in newspaper articles.</b> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>I give permission for my child’s image to be used for promotional purposes such as in the school prospectus.</b>  | <input type="checkbox"/> | <input type="checkbox"/> |
| We like to share the many events, activities and successes on social media such as Twitter and Facebook. <b>Parents/carers are not permitted to share photographs used and posted by the school on any form of social media in a public social media forum (e.g. your own Facebook page).</b><br><br><b>I give permission for my child’s image to be used on social media.</b>   | <input type="checkbox"/> | <input type="checkbox"/> |
| We also use photographs on the school website including school newsletters.<br><br><b>I give permission for my child’s image and their work to be used for the above.</b>  | <input type="checkbox"/> | <input type="checkbox"/> |
| Photographs may also be taken during lessons and used in pupils’ work books, EYFS online learning journals (Tapestry), or for display around the building.<br><b>I give permission for my child’s image to be used for the above.</b>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Signed:</i>   |                          |                          |
|  |                          |                          |

|   |                          |                          |
|---|--------------------------|--------------------------|
| <p><b>THE USE OF VIDEO CLIPS AND IMAGES RATED PG</b></p> <p>We like to make use of modern technologies throughout the curriculum and sometimes take the opportunity to use feature films and associated resources for education or enrichment activities. There are occasions when the materials may have been classified PG. We ask for your permission to use PG rated films that we deem to be acceptable for the age, maturity and well-being of your child.</p> <p><i>I give permission for my child to watch films and clips that have a PG classification.</i></p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>FOUNDATION STAGE AND KEY STAGE 1 AND 2 PLAYGROUND</b></p> <p>During the day, the children use the outdoor play areas and trim trails. This is for use by children under the supervision of a member of staff employed by the school. The equipment is perfectly safe but is designed to be challenging for children from the ages of 3 to 11 years. Children must only access this equipment during the school day, when accompanied by an employee of the school and not at any other time. Parents are asked to ensure that their children do not access the equipment, thereby ensuring their safety whilst waiting on the yard.</p> <p><i>I give permission for my child to be able to access the Foundation Stage and Key Stage 1 and 2 Playground and under the supervision of an employee of Richmond Methodist School.</i></p> <p style="text-align: right;"><i>Signed:</i></p> | <input type="checkbox"/> | <input type="checkbox"/> |



| For Office use only   |                 |       |
|---|-----------------|-------|
| Unique Pupil Number (UPN)<br>Issue for children new to education/request from previous school |                 |       |
| Common Transfer Form requested from previous school   | <b>Yes / No</b> |       |
| Birth Certificate seen:   | Signature:      | Date: |
| Data input into SIMS database:  | Signature:      | Date: |
| Consent information into database   | Signature:      | Date: |
| Health questionnaire information into database  | Signature:      | Date: |
| FSM/Pupil Premium Information received  | Signature:      | Date: |
| Start Date  | Signature:      | Date: |