



Brayton  
Academy



# Confidential Information







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**Please return fully completed booklet to Brayton Academy**





# Home School Agreement

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On our part, we will do everything in our power to ensure that the student is safe from bullying, harassment or any other danger, that they are encouraged to be healthy and active; and that they are allowed and encouraged to make a positive contribution in our learning community

Furthermore, it will be our absolute priority to ensure that they enjoy school and make the maximum academic progress possible ensuring that they have the skills and knowledge needed for further employment.

We will always maintain an effective communication partnership with parents and carers, notifying them quickly when concerns arise as well as always looking to praise students where appropriate. It will be our intention to ensure that every young person who works well at Brayton Academy will be made to feel valued, appreciated and recognised.

School Principal Signature:

Date: 14/03/2023

## The Student

As a student at Brayton Academy, I will do my best at all times. I recognise that in order to do this I need to behave well and to show respect to all adults and all other students who make up our learning community.

I recognise that bullying is entirely unacceptable and that I will act to stop bullying whenever it is in evidence.

I will do everything I can to promote the good name of our academy including wearing my uniform well and helping to keep our environment as tidy as possible.

In lessons I will bring my equipment, complete homework to the best of my ability and do everything I can to learn and progress as well as possible.

Student Signature:

Date:

## The Parent/Carer

I recognise the enormous importance of my role as a parent/carers in supporting my child at Brayton Academy. I will attend all parent consultation evenings to support the progress of my child at Brayton Academy.

I will check and sign the planner each weekend and will do all that I can to encourage my son/daughter to work hard in school, be positive about learning and be ambitious for the future.

Where issues occur in the academy which are a concern to me I will notify key professionals immediately and do everything that I can to work in partnership with the academy to resolve such difficulties. I will play my part in supporting the academy in implementing all policies approved by the governors and Trust Board.

I will do everything I can to ensure that my child attends the academy every day, that they are in correct uniform and that they are properly equipped for learning.

Parent/carers Signature:

Date:

Print Parent/carers name:



# Confidential Enrolment

## Student Details

Surname		Legal Surname	
Forename		Middle name	
Preferred Forename/Surname (if different to above)			
Form (if known)			
Date of Birth			
Gender			
Address			

## Parent/Carer And Other Contacts Details

Please provide details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Add contacts in the order that you wish for them to be contacted in an emergency.

	Name	Relationship To Student	Parental Responsibility? (Yes/No)	Address	Home Phone Number	Mobile Phone Number	Work Phone Number
1							
2							
3							
4							



Parent / Carer Email Addresses - High Priority Information

Parent / Carer	Email address

Dietary Needs

Please list any dietary information the Academy may need to be aware of.

NB: please ensure a ‘Special Diet’ request form is also completed.

Medical

Medical Conditions

Please list any0 medical conditions the academy needs to be aware of.

Medical Practice

Please list the contact details for your child’s medical practice.

Address	
Telephone Number	
Doctor	





### Additional Information

Please add any other information you think the academy should be aware of below (e.g. medical, emotional)  
*SEND - Please also provide any information about any learning difficulties or special arrangements in class your child may have.*

### Brothers or Sisters

Any Brother Or Sister At This Academy? If so, please detail below their name(s) and form(s)

If there is information you would prefer to communicate personally, please feel free to contact the Brayton Academy Admin Team.

Signed Parent / Carer 1: \_\_\_\_\_

Signed Parent / Carer 2: \_\_\_\_\_



# Ethnic Background

Asian or Asian British

Indian

☐

Bangladeshi

☐

Pakistani

☐

Any other Asian background

☐

Black or Black British

Caribbean

☐

Any other Black background

☐

African

☐

Chinese

Chinese

☐

Mixed/Dual background

White/Black Caribbean

☐

White and Asian

☐

Any other mixed background

☐

White and Black African

☐

White

British

☐

Traveller of Irish Heritage

☐

Any other white background

☐

Gypsy/Roma (Housed)

☐

Irish

☐

Gypsy/Roma (Other)

☐

Any Other Ethnic Group

Other Ethnic Background

☐

DfE Mother Tongue

English

☐

Other (please specify)





# ParentPay

## Biometric Cashless Catering System (ParentPay)

We use the Biometric Trust-e Cashless System supplied by Nationwide Retail Systems Ltd for purchasing items in the canteen. For this, we require the consent of at least one parent in order for the biometric information of your child to be processed. Please be assured that this information remains within the academy and that the biometric information taken is an algorithm and not the actual finger print.

If you choose not to have your child registered the academy will provide a 4 digit PIN code as an alternative method of identification. The preference of the academy is to use biometrics as this is more secure and faster than any other method of identification and we appreciate your co-operation with regards to this matter. Please note that PIN Codes do not have the same level of security and it will be your child's responsibility to remember the code and keep it secure at all times.

We have two payment options available to you – **online payments or coin and note payments at the revaluation paypoint in school. Please be aware that it can take up to 48 hours for money to register on your child's account.**

A daily 'spend limit' of £5 will be programmed into the system. This can be increased or decreased for an individual student by making a written request to the Catering Manager.

Thank you.

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## **Biometric Cashless Catering System (ParentPay) consent form**

I/we confirm that I/we wish our child **TO BE/NOT TO BE** (please delete where applicable) registered on the academy's Biometric Cashless Catering System with immediate effect.

I understand that I/we can withdraw my child/children at any time in writing.

Child's Name		Child's Date Of Birth	Form (If Known)
Relationship To Child	Name Of Parent/Carer	Parent / Carer's Signature	Date

Signature of child if over 13 years old \_\_\_\_\_



# Parental Agreement for setting to administer medicine

The academy will not give your child medicine unless you complete and sign this form, and the academy has a policy that the staff can administer medicine.

Name Of Academy	Brayton Academy			
Name Of Child				
Date Of Birth				
Group / Class / Form (If Known)				
Medical Condition Or Illness				
Name / Type Of Medicine (as described on the container)				
Expiry date				
Dosage and method				
Timing				
Special Precautions / Other Instructions				
Are there any side effects that the school/setting needs to know about?				
Self-Administration (Yes/No)				
Procedures To Take In An Emergency				
<b>NB: Medicines must be in the original container as dispensed by the pharmacy.</b>				
Emergency Contact Name				
Daytime Telephone No.				
Relationship To Child				
Address				
<b>NB: I Understand That I Must Deliver The Medicine Personally To Reception.</b>				

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting and other authorised staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_



# Consent Form to use an image or photograph

**Photographs and Images:** Increasingly, computers and related technology are making it easier to use pictures and images in printed materials or on websites. As more and more people now have home computers we need to take steps to prevent photographs and images being wrongly used. We take the issue of child safety very seriously and will not use an image of your child without your prior consent. This is a general consent form to enable the academy to take and use photographs of your child individually or in a group. In general, we would not identify your child by name, however, there may be occasions when it is intended to use a photograph or image that identifies your child by name, e.g. as part of a newspaper article or to celebrate their achievements in the academy newsletter or on the school website. You can indicate below whether you would be happy for the school to use your child's photograph and also whether you give permission for your child to be identified or not.

**NB:** Should you indicate that you do not wish them to be photographed we ask that you talk to and tell your child so they are aware and know why we may ask them to step out of a group photograph.

**Videos:** Although there is no difference in the principle of use of electronic images and use of video, some parents/carers may have concerns about other individuals' videoing their child whilst participating in academy activities. Therefore, it is proposed to give you the opportunity to withdraw your child from activities where videoing will be allowed.

Name of Child			
Name of Parent/Carer			
Images: I consent to my child appearing in photographs being used in printed information, displays, promotional literature, internet access, school visits, PE and Interschool Sports. I understand that this image will <b>NOT</b> be used for anything that may cause offence, embarrassment or distress for the child or their parent or carer.		Yes/No - please tick the statements that apply	
I give permission for the academy to use photographs within the academy, i.e. academy displays, that identify my child by name.			
I give permission for the academy to use photographs within the academy, i.e. academy displays, that <u>do not</u> identify my child by name.			
I give permission for my child to appear in photographs in external media, e.g. on the academy website, in the academy newsletter, local press, that identify my child by name.			
I give permission for my child to appear in photographs in external media, e.g. on the academy website, in the academy newsletter, local press, that <u>do not</u> identify my child by name.			
Videos : I understand that from time to time the academy will allow some activities to be videoed.		Please tick one	
In such circumstances I give permission to my child participating in those activities.			
In such circumstances I <u>do not</u> give permission to my child participating in those activities.			
Signature of Parent or Carer:			
Relationship To The Child:		Date (Day/Month/Year):	

Signature of child if over 13 years old \_\_\_\_\_

**Please note:** This consent is considered valid for the time your child is registered at Brayton Academy unless you inform Brayton Academy, in writing, of withdrawal of consent. Some photographs and images may be retained by the academy as part of its historical record. **NIL RETURN WILL BE TAKEN AS CONSENT**



# Notes

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## Free School Meals

If you would like to apply for Free School Meals please visit the North Yorkshire County Council website:

<https://www.northyorks.gov.uk/free-school-meals>

**Please ensure that you complete all sections and return the whole booklet to the academy.**



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