



HELSTON COMMUNITY COLLEGE
ASPIRATION . AMBITION . ACHIEVEMENT

ENROLMENT FORM 2023/2024

(Please note: This application form does not constitute an offer of admission)

PLEASE READ THE ENROLMENT FORM EXPLANATORY NOTES AND COMPLETE ALL SECTIONS

CONFIDENTIALITY: The information given below will be maintained on the College's data base to which no unauthorised person shall have access and will be subject to strict control under the Data Protection Act. Your signature on this form implies your consent for the College to process the data.

SECTION A - BASIC STUDENT DETAILS

Legal Forename:		Preferred Forename:	
Middle Name(s):		Preferred Surname:	
Legal Surname:		Previous Surname:	
Sex:		Date of Birth:	Please select.
Gender:			
Pronouns:	Please select from the drop down list.		

Names of Parents:	
-------------------	--

Siblings (including half/step brothers and sisters):
Please list in age order any siblings **who are currently at this College.**

Forename/s	Surname	Gender	Date of Birth	Same address as student
			Please select.	
			Please select.	
			Please select.	

SECTION B - STUDENT ADDRESS

House Number/Name:	
Street:	
Town/City:	
County:	
Postcode:	

SECTION C – REGISTRATION (OFFICE USE ONLY)

Year Group	UPN	Admission Number	Admission Date

Birth Certificate seen (Y/N)	Name Change Documents seen (Y/N)	Quick Note Information (Y/N)

Section D – Family/Home

What is your relationship to the child?	Please select from the drop down list.
With whom does the child live?	

Priority Contacts

Priority contacts are namely the parents/carers of the child who automatically share parental responsibility as stated on the child's birth certificate. Non-resident parents, those not living in the family home, may still have certain rights if they have parental responsibility. Married parents have equal parental responsibility, even when separated or divorced.

The school recognises that, while the parents of some students may be divorced or separated, both have a right to be informed of / involved in their child's education. However, we expect that parents, whatever the nature of their separation, will do all they can to communicate with each other and share information from and for the school, for the benefit of their child. It is assumed that the parent with whom the child principally resides will keep the other parent informed.

For all day to day communications, the school will only contact the resident parent. This includes informing resident parents of any:

- Personalised educational support the school is providing for the child
- Behaviour incidents involving the child (except in the case of exclusion)
- Accidents or injuries
- Illnesses which require a child to be collected from the school early

Unless the non-resident parent has specifically asked the school to receive consent from them for trips, the school will act on consent from the resident parent. In cases where the non-resident parent wishes to be consulted, consent from both parents will be needed before the child takes part in any trip or visit.

The school cannot hold places for students whilst parents consult and the onus is on the family to indicate that both parents give consent. We do not send text messages to non-resident parents, which give information on cancelled activities and reminders regarding events in the school.

We do, however, recognise that communication between parents is not always possible. If an estranged parent (one who is not on the school records) wishes to receive information from the school such as progress reports or an invitation to attend parent / teacher meetings, they should contact the child's school in writing with a specific request for separate communication.

Should an estranged parent seek information or access to his/her child, the school will always inform the main carer of this to check Parental Responsibility and ensure no Court Order is in place. Proof of identity and of Parental Responsibility of the non-resident parent will always be required in these cases.

Priority Contact

Relationship to child:

☐ Biological Parent☐ Other**If other, please state:**☐ This contact has parental responsibility.

Title:	
Forename:	
Surname:	
Full Address:	

Email:

Telephone		
Mobile:		<input type="checkbox"/>
Home:		<input type="checkbox"/>
Work:		<input type="checkbox"/>
<i>Please tick ONE telephone number as the main number for emergency use.</i>		

Please state which days/hours to use these numbers.
I.e. Do not call the home number between the hours of
09.00 and 17.00, Monday-Wednesday.

--

Priority Contact

Relationship to child:

☐ Biological Parent☐ Other**If other, please state:**☐ This contact has parental responsibility.

Title:	
Forename:	
Surname:	
Full Address:	

Email:

Telephone		
Mobile:		<input type="checkbox"/>
Home:		<input type="checkbox"/>
Work:		<input type="checkbox"/>
<i>Please tick ONE telephone number as the main number for emergency use.</i>		

Please state which days/hours to use these numbers.
I.e. Do not call the home number between the hours
of 09.00 and 17.00, Monday-Wednesday.

--

OTHERS WITH PARENTAL RESPONSIBILITY AS DEFINED BY EDUCATION ACT 2011

Parental responsibility may be shared between a number of people beyond the child's parents.
In such circumstances, the College will forward copies of College reports if requested.

Relationship to child:	
Title:	
Forename:	
Surname:	
Full Address:	
Email:	
Telephone:	

Section E - Court Orders

If the student is subject to any Court Orders please specify the terms below. This information is CONFIDENTIAL but will help the College understand the student's position.

A COPY OF ANY COURT ORDER WILL NEED TO BE PROVIDED.

Please tick if attached ☐

Section F – Adopted and Previously Looked After Children

If a student is adopted, or has ever been in the care of a local authority, the College is able to apply for additional funding to support that student's education. In order to do this, we would require some form evidence (such as an adoption certificate). We understand that this information is highly sensitive and would treat it in the utmost confidence. Should you wish to discuss this matter, please contact Mr. Andrew Oates (Senior Assistant Headteacher - Inclusion).

☐ My child is adopted

☐ My child is a previously looked after child

Dates when in care:	
Local Authority which provided care (e.g. Cornwall):	
I have enclosed a copy of any relevant documentation (Y/N) <i>E.g. Adoption Certificate or Special Guardianship Order</i>	
Any additional comments/information:	

Section G – Young Carers

A young carer is defined as **someone under the age of 18 who looks after a family member or friend who has a physical or mental health condition, or misuses drugs or alcohol.** They may also look after brothers, sisters or elderly relatives too. As a College, it is important that we know who these students are, in order to fully support them. Should you wish to discuss this matter, please contact Mr. Andrew Oates (Senior Assistant Headteacher - Inclusion).

☐ My child is a young carer

Section H - Additional Contacts

From time to time it may be necessary to contact someone during the College day; e.g. in the case of a child's sickness. Please list below the details of any person we can contact on such an occasion, other than those listed above. Details should be listed in the order of contact preference.

Contact 1	
Relationship to child:	
Title:	
Forename:	
Surname:	
Full Address:	
Email:	
Telephone:	

Contact 2	
Relationship to child:	
Title:	
Forename:	
Surname:	
Full Address:	
Email:	
Telephone:	

Contact 3	
Relationship to child:	
Title:	
Forename:	
Surname:	
Full Address:	
Email:	
Telephone:	

Contact 4	
Relationship to child:	
Title:	
Forename:	
Surname:	
Full Address:	
Email:	
Telephone:	

Section I - Student Medical Information

Please tick to confirm your agreement for the College to initiate appropriate medical treatment in the event of an emergency.

☐ **Emergency Medical Consent**

Doctor's Surgery	
Medical Practice:	
Practice Address:	
Telephone:	
Doctor's Name:	

Dietary Needs	
<input type="checkbox"/>	Gluten Free
<input type="checkbox"/>	Kosher foods only
<input type="checkbox"/>	No dairy produce
<input type="checkbox"/>	No nuts of any type/quantity
<input type="checkbox"/>	No pork
<input type="checkbox"/>	Ramadan
<input type="checkbox"/>	Seafood allergy
<input type="checkbox"/>	Vegetarian

Does your child have a medical condition that the College should be aware of?

This could include asthma, diabetes, migraines, epilepsy, bad period pains, sleepwalking, bedwetting or any other illness, medical condition or disability.

☐ Yes ☐ No

If yes, please give details below:

Is your child allergic to anything?

E.g. Penicillin, other medications, elastoplast, food or drink?

☐ Yes ☐ No

If yes, please give details below:

Does your child regularly see a medical professional?

☐ Yes ☐ No

If yes, please give details below:

Is your child receiving any medical treatment or medication at present?

E.g. EpiPen, inhaler etc.

☐ Yes ☐ No

If yes, please provide name, dosage and confirm if it is required during College.

Does your child have a Medical Care Plan provided by their consultant or GP?

☐ Yes ☐ No

If yes, please email a copy to medical@helston.cornwall.sch.uk.

Does your child's medical condition mean they require a more complex response than basic first aid?

☐ Yes ☐ No

If yes, please give details below:

Can your child swim 50 meters?

☐ Yes

☐ No

☐ Unsure

Medication

If your child requires medication due to sudden illness, you will need to complete the 'Parental agreement for school/setting to administer medicine' form which is available on the College website.

Prescribed medicine must be in its original box and kept with the Healthcare Champion.

Please note under 16s are not permitted Ibuprofen without a Doctor's note.

Section J– SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND) – should this be on a separate form?

Is there any other information you feel we should be aware of? (e.g. Does your child have any special educational needs or disabilities?)

Have any other services been involved with your child? (e.g. Health Visitor; Social Services; Educational Psychologist; Bilingual Support Service; Speech Therapist.) If so, please give details.

Has your child been involved in termly review meetings with your primary school SENCO?

Did your child receive additional support with their end of year tests (if taken)? (e.g. Reader/Scribe/Extra time.)

Do you have any concerns that your child may have additional needs?

Has your child had a Dyslexia Screening Test?

Section K - Student Ethnic/Cultural Information

The College is required by law to provide the information you give in this section to the DfE. The College will not use this information for any other purposes.

Ethnicity		
<input type="checkbox"/> Refused	<input type="checkbox"/> White and Black Caribbean	<input type="checkbox"/> Bangladeshi
<input type="checkbox"/> White – Cornish	<input type="checkbox"/> White and Black African	<input type="checkbox"/> Any Other Asian Background
<input type="checkbox"/> Other White British	<input type="checkbox"/> White and Asian	<input type="checkbox"/> Black Caribbean
<input type="checkbox"/> White – Irish	<input type="checkbox"/> Any Other Mixed Background	<input type="checkbox"/> Black – African
<input type="checkbox"/> Traveler of Irish Heritage	<input type="checkbox"/> Indian	<input type="checkbox"/> Any Other Black Background
<input type="checkbox"/> Gypsy/Roma	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Chinese
<input type="checkbox"/> Any Other White Background		<input type="checkbox"/> Any Other Ethnic Group

First Language	
<input type="checkbox"/> English	
<input type="checkbox"/> Other	
If other, please state:	

Religion		
<input type="checkbox"/> Anglican	<input type="checkbox"/> Jehovah's Witness	<input type="checkbox"/> Roman Catholic
<input type="checkbox"/> Buddhist	<input type="checkbox"/> Jewish	<input type="checkbox"/> Sikh
<input type="checkbox"/> Christian	<input type="checkbox"/> Methodist	<input type="checkbox"/> Other Religion
<input type="checkbox"/> Hindu	<input type="checkbox"/> Muslim	<input type="checkbox"/> No Religion

Status			
Asylum Seeker	<input type="checkbox"/>	Refugee Status	<input type="checkbox"/>
		Traveller Status	<input type="checkbox"/>

Section L - Student Additional Information

Meals (Please select ONE option)	Mode of Transport (Please select ONE option)
<input type="checkbox"/> School Meal	<input type="checkbox"/> Car
<input type="checkbox"/> Free School Meal	<input type="checkbox"/> Car Share
<input type="checkbox"/> Packed Lunch	<input type="checkbox"/> Walks
<input type="checkbox"/> Home	<input type="checkbox"/> Bicycle
	<input type="checkbox"/> School Coach
	<input type="checkbox"/> Public Transport
	<input type="checkbox"/> Taxi

Free School Meals

Funding from Free School Meals means that we are able to claim additional funding for our College. With this money we could arrange one to one tuition, provide a range of intervention programmes and provide a wider range of enrichment activities.

If your child is currently in receipt of Free School Meals, you DO NOT need to re-apply. This will automatically transfer over as your child moves from primary to secondary school.

If your child is currently NOT receiving Free School Meals and you would like to apply, please visit the following website:
<https://www.cornwall.gov.uk/schools-and-education/schools-and-colleges/school-meals/>

Free School Meals Team: schoolmeals@cornwall.gov.uk | 01872 323298

Child of Service Personnel (Child living with parent/carer serving in Royal Navy, Army or RAF)

If you, as the resident parent/carer of your child, are service personnel, serving in regular military units of all forces (including those who have served within the last 6 years), please tick the box below.

☐ Yes

☐ No

Please also indicate if a non-resident parent/carer is service personnel.

☐ Yes

☐ No

The Department for Education (DfE) has asked for this information to be collected on the School Census so that they can identify both the impact that being a Service child has on their education and the impact that catering for large numbers of Service children has on the school.

Section M - Student School History

Please ensure you give details of any previous schools including nursery, overseas or private education.

Name of current school:	
Address of current school:	
Dates attended:	

Details of any other schools attended should be listed in chronological order below.

Name of school:	
Dates attended:	

Name of school:	
Dates attended:	

Section N – Use of Images Consent

I consent to the use of my child's image either in print or on the website	<input type="checkbox"/>
I consent to the use of my child's image on social media	<input type="checkbox"/>
I consent to the use of my child's image by the press	<input type="checkbox"/>
I consent to my child's full name being published	<input type="checkbox"/>
I consent to my child's first name being published	<input type="checkbox"/>
I do NOT consent to my child's image being used	<input type="checkbox"/>

Section O – ICT Acceptable Use Agreement

Please carefully read section O of the enclosed help notes before completing this section.

Student

This form relates to the student ICT Acceptable Use Agreement, which is included in the explanatory notes. Please sign below to confirm that you have read, understood and agree to the rules included in the Acceptable Use Agreement. If you do not sign and return this agreement, access will not be granted to College ICT systems.

I have read and understand the above and agree to follow these guidelines when:

- I use the College internet and ICT systems and equipment (both in and out of College).
- I use my own equipment in College (when allowed) e.g. mobile phones, tablets, cameras etc.
- I use my own equipment out of College in a way that is related to me being a member of this College. e.g. communicating with other members of the College, accessing College email, Google Apps, website etc.

Parent/Carer

- I understand that the College will take every reasonable precaution, including monitoring and filtering systems, to ensure that young people will be safe when they use the internet and ICT systems. I also understand that the College cannot ultimately be held responsible for the nature and content of materials accessed on the internet and other mobile technologies.
- I understand that my child's activity on the internet and ICT systems will be monitored and that the College will contact me if they have concerns about any possible breaches of the Acceptable Use Agreement.
- I understand that the College will not accept responsibility for the loss or damage of my child's personal electronic devices (including mobile phones) which they choose to bring on site.

Home IT Provision

Please indicate which of the following your child has access to at home. Devices include PCs, laptops and chrome books.

- | | | |
|---|--|-------------------------------|
| <input type="checkbox"/> Shared home device | <input type="checkbox"/> Shared tablet | <input type="checkbox"/> None |
| <input type="checkbox"/> Own device | <input type="checkbox"/> Own tablet | |

Student signature:		Parent/Carer signature:	
---------------------------	--	--------------------------------	--

Section P – Personal Social Health Citizenship and Economic Education (which includes Relationships and Sex Education)

You have a right to withdraw your child from Sex Education delivered as part of RSE in secondary schools which, unless there are exceptional circumstances, will be granted up to three terms before your child turns 16. At this point, if the child themselves wishes to receive sex education rather than be withdrawn, the College will make arrangements for this to happen in one of the three terms before the child turns 16 - the legal age of consent.

I acknowledge receipt of the enclosed information (section P of the help notes) advising me on Relationships and Sex Education.

- ☐ I give consent for my child to attend the non-statutory programme as detailed in section P.
- ☐ I do not give consent for my child to attend the non-statutory programme as detailed in section P.

Note: If you do not indicate above we will assume that consent has been given.

Section Q – Data Protection: Fair Processing (Privacy) Notice

- ☐ Please tick to indicate that you have read and understood the Fair Processing (Privacy) Notice for the purpose of data protection laws as detailed in section Q of the help notes.

Section R - Home-College Agreement

I have read the agreement and will support the College's policies and procedures.	Parent/Carer Signature:	
I will do my best to help myself and be responsible for my learning.	Student Signature:	
On behalf of the College	Headteacher:	

Section S - Modern Foreign Languages Option

At Helston Community College, students have the opportunity to study a Modern Foreign Language. We will only be able to offer both languages if there is sufficient interest in each language. Please indicate your child's preference below.

- ☐ Spanish
- ☐ French
- ☐ No preference

Section T – Trips and Visits Consent (Insurance)

Please note that there is a limited amount of cover for personal accident and loss of personal belongings through the College's membership of the Department for Education's Risk Protection Arrangements. Details are available on request.

Please read and agree to confirm the following:

- I have read the information provided and agree to my child taking part in educational trips and visits. I acknowledge the need for my child to behave responsibly at all times.
- I understand that the staff responsible for the activities will take all reasonable care of participants.
- I consent to any emergency treatment necessary. I therefore authorise the party leader(S) to sign, on my behalf, any written form of consent required by the hospital authorities should medical treatment (a surgical operation or injection) be deemed necessary, provided that the delay required to obtain my signature might be considered, in the opinion of the doctor or surgeon concerned, likely to endanger my child's health or safety.
- I consent to my child travelling in a motor vehicle driven by a member of staff or other adult in the event of an emergency and in accordance with associated LA guidance.
- I consent to my child being given paracetamol and/or any other medication or treatment given or prescribed by a doctor.
- I understand that, should any of the above details change during the academic year, I will complete and return a replacement form to College reception.

- ☐ Agree
- ☐ Disagree

Data Protection Act 2018

The College is registered under the Data Protection Act for holding personal data. The College has a duty to protect this information and to keep it up to date. The College is required to share some of the data with the Local Authority and with the DfE. For further information, please see the Data Protection Policy on the College website.

Student signature:		Parent/Carer signature:	
---------------------------	--	--------------------------------	--

Section U - Declaration

I confirm that the above information is true and accurate. I undertake to inform the College if any of the above details change. I understand that this form does not constitute an offer of admission by the College.

Parent/Carer Electronic Signature:		Date:	Please select.
---	--	--------------	----------------

Once completed, please SAVE the Enrolment Form to your device

and send as an attachment via email to

admissions@helston.cornwall.sch.uk

HELSTON COMMUNITY COLLEGE

Church Hill, Helston, Cornwall, TR13 8NR

01326 572685 | enquiries@helston.cornwall.sch.uk

