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| **Mr P McCaffery** **Headteacher**Tel: 01942 909009[www.bedfordhighschool.co.uk](http://www.bedfordhighschool.co.uk) e-mail: enquiries@admin.bedford.wigan.sch.uk  **BEDFORD HIGH SCHOOL** **Manchester Road** **Leigh** **Lancashire** **WN7 2LU** |
| **STUDENT ADMISSION FORM (2024/25) *Please complete all sections*** |
| Name of current Primary School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **Student’s Details** |
| **Legal** Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Legal** Forenames: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Preferred** Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Preferred** Forenames: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender (M/F): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **Contact Details** – Please provide a **minimum of two** contacts in the order in which these persons should be contacted in the event of an emergency.  |
| **Contact****Priority****1** | Does your child live with this contact? YES NOSurname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forename: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: (if different to above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parental Responsibility Yes No Home Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_   |
| **Contact****Priority****2** | Does your child live with this contact? YES NOSurname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forename: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: (if different to above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parental Responsibility Yes No Home Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |
| **Contact****Priority****3**  | Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forename: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: (if different to above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parental Responsibility Yes No Home Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |
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| **Family Links** |
| Position in family \_\_\_\_\_\_ / \_\_\_\_\_\_\_ (e.g. 2/3 = second of three children)Name(s) of sibling(s) at Bedford High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Meal Arrangements** |
| Free School Meal Paid School Meal Packed Lunch |
|  |
| **Medical/Physical Health/Wellbeing/SEND/Dietary needs**  |
| Medical Conditions/Physical Health/Wellbeing/SEND/Dietary needs (add comments in Additional Information section): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name of Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Surgery: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Agency involvement:** **Startwell W&L Young Carers Embrace CAMHS TESS EP Other** |
|  |
| **Cultural** |
| Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Language:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Additional Languages Spoken at Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religion\_\_\_\_\_\_\_\_\_\_ |
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| **Travel Arrangement** |
| Bicycle  Bus  Car  Walk   |

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| **Devices at Home** |
| Internet access Yes No | Mobile phone  Yes No | Desktop Computer/PC Yes No | Laptop Yes No | Ipad/Tablet Yes No | Other device i.e. PS4, XBox Yes No |

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| **Looked after Children/Previously Looked After Children** |
| ***Please note this information is for school records/use only and access to the information is restricted according to our Data Protection and Freedom of Information obligations.***Has your child ever been in the care of a local authority NO  YES Has your child ever been in Private Foster NO  YES If YES please identify (tick) which of the following statements, A or B, describes your child’s current status.**A** A previously looked after child is a child who was looked after but were then immediately adopted, became subject to a child arrangement order or a special guardianship order. **B**  A looked after child is defined as a child in the care of the local authority or who is being provided with accommodation by a local authority in the exercise of their social services functions at the time of making an application to the school.**Other** Please specify below. |
| **Additional Information (optional)** |
| Please provide any further personal information you would like the Transition Team or Pastoral Team for Year 7 to be aware of that may assist with your child’s transition. |

Dear Parent / Guardian

**COMBINED PARENTAL CONSENT**

In order to comply with the General Data Protection Regulation we are required to obtain your consent for certain activities we undertake at school. Rather than write to you separately for these we have combined them onto one single form.

This information will be held on the school’s management systems and you can be assured that it will only be used in accordance with our Privacy Notice, Data Protection Policy, IT Security Policy and Records Retention Policy. Further information about this can be found on our website: [www.bedfordhighschool.co.uk](http://www.bedfordhighschool.co.uk)

The safe handling of any personal information we collect about you and your child is important to us. This is why we will always explain clearly what information we are collecting and why. We may need to share your data with third parties where it is necessary. We will not share your data if you have advised us that you do not want it shared unless it’s the only way we can make sure your child stays safe and healthy or we are legally required to do so.

By obtaining consent from you now, this will cover your child throughout their time at the school. You will need to complete the attached form and return it to school as soon as possible. We can no longer assume that parents ‘opt in’ where consent is not received, therefore we will continue to ask you for your consent if we don’t hear from you.

Our Privacy Notice

We need to let you know that we store personal data about you and your child on the school’s management systems. We will only share this data in accordance with those persons who provide services to the school and organisations concerned with the welfare of your child. Examples are; Youth Support Services, Social Services, Local Authority Support Services, etc. Our privacy notice is displayed on our website.

For Publications

In addition to using your child’s image around the school (i.e. newsletters and displays) we need your permission to allow us to use photographs and/or filmed images of your child for publicity reasons in the local media, (sometimes social media) and the school website. We will not share these images with anyone else. (Examples are; presenting a cheque to a charity, achievement awards, sporting events or school presentations). You have the right to withdraw your consent at any time. To withdraw your consent, please email: enquiries@bedford.wigan.sch.uk OR write to: The Headteacher, Bedford High School, Manchester Road, Leigh, WN7 2LU. You should address all correspondence relating to withdrawing consent with the heading WITHDRAW CONSENT followed by your name. Once we have received notification that you have withdrawn your consent, we will no longer process this information for the purpose or purposes you originally agreed to, unless we have another legitimate basis for doing so in law.

Using Email and Mobile Telephone to Contact You

We need your permission to use your email address and mobile contact number for sending letters/communications to you about your child. Therefore, we ask you to provide email addresses and mobile numbers as part of our data collection exercise.

We will send you text messages. The school will only occasionally use traditional mail (i.e. letters); however, we will often use emails and/or mobile telephone numbers to contact you. Therefore, should these details change, you must inform us with immediate effect to avoid missing vital information. Email addresses and mobile telephone numbers will not be passed on to others and will only be used by the school to communicate messages about your child.

If you do not give this permission, it will be your responsibility to contact school for information.

Emergency medical treatment

We need your permission for urgent medical treatment to be given (if required) by a qualified first aider during the school day or during an out of school activity, where it is not possible to contact you or any other person with parental responsibility.

Bio Registration

We need your permission to register your child on our cashless catering system as cash is no longer accepted at the service points. Students simply place their finger onto a scanner at the point of sale to purchase food at break times and lunchtimes. Those students who do not want their finger scan to be taken, but still want to purchase food will be given a card.

Students who bring in a packed lunch from home are welcome to register. Registration allows access to our dining facilities throughout your child’s time at the school regardless of whether they want to use this facility or not. A similar finger scan system is also used in our Library to access reading materials.

Please can you ensure that you complete and return the combined consent form to school.

Yours sincerely,



Mr Paul McCaffery

Headteacher

Combined **Parental** Consent Form

This covers your child throughout their time at the school

**PARENT/GUARDIAN TO COMPLETE THIS PAGE**

**Child’s Name:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

![C:\Documents and Settings\Robertsm.LHS\Local Settings\Temp\Temporary Internet Files\Content.IE5\G1YWD1QJ\MC900434713[1].wmf]()or ![C:\Documents and Settings\Robertsm.LHS\Local Settings\Temp\Temporary Internet Files\Content.IE5\EMG0Q816\MC900432537[1].png]()

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| **Privacy notice**I am aware of the School’s Privacy Notice explaining how we store data on the school’s management systems and share this data with those who only provide services to the School and organisations concerned with the welfare of my child.  |  |
| I give my consent for my child to take part in sex education programmes. |  |
| I give my consent to the use of my contact details for sending letters/communications to me |  |
| **Emergency medical treatment**I consent to my child receiving necessary urgent medical treatment for any injury or illness occurs during either the school day or out of school activity. |  |
| **Bio Registration**I consent to my child’s finger scan being taken to enable them to use the school’s cashless catering system and library system.  |  |
| **Publications**I give my consent for photographs and filmed images of my child to be used for promotional purposes in the local media (sometimes social media) and school website.\*Please see note at bottom of the page for details to withdraw your consent.

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|  | Consent Given |
| Use of Images | Yes | No |
| Use of photographs for in school records |  |  |
| Use of photographs/videos in displays within the school premises |  |  |
| Use of photographs/videos within school publications (such as prospectuses) |  |  |
| Use of photographs/videos within the school’s official website |  |  |
| Use of photographs/videos within the school’s social media accounts (facebook, twitter etc.) |  |  |
| Use of photographs/videos by local and national press |  |  |

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 **Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Parent/Guardian Parent/Guardian

 **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\*You have the right to withdraw your consent at any time. To withdraw your consent, please email: enquiries@bedford.wigan.sch.uk OR write to: The Headteacher, Bedford High School, Manchester Road, Leigh, WN7 2LU. You should address all correspondence relating to withdrawing consent with the heading WITHDRAW CONSENT followed by your name. Once we have received notification that you have withdrawn your consent, we will no longer process this information for the purpose or purposes you originally agreed to, unless we have another legitimate basis for doing so in law.