Ballakermeen High School

**St Catherine’s Drive, Douglas, Isle of Man, IM1 4BE**

**APPLICATION TO ENROL AT BALLERKERMEEN HIGH SCHOOL DURING THE ACADEMIC YEAR**

Before completing this form, please ensure that your current residence is within our catchment area. You can check this by telephoning us, or the Department of Education, Sport and Culture, and giving your postcode. If you wish to apply for an out of catchment placement, the DESC will advise on the correct procedure.

Please fill in the form in capital letters and return it to school reception, together with the requested documents. These will be copied and returned to you. We will then gather information from the previous school and other agencies as necessary, and invite you to bring your child to school for an interview and induction. Your child will normally be able to start school within a few days of this interview.

Full name of child:

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Date of Birth: Nationality:

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First Language (if not English): Fluency in English (if not first language). Please circle:

None / Beginner / Intermediate / Fluent

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Name of parent/guardian:

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Contact telephone number:

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Contact email address:

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Current address:

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Postcode:

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Reason for transfer:

Current school:

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Current school address:

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ediate / Fluent

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Type of school:

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Current school year group:

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Form Tutor:

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Head of Year:

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Has the current school been informed of the transfer?

Yes / No (please circle one)

If you will be entering Years 10 or 11, the following subjects are compulsory, and are taken with the exam boards stated below:

English CAIE (Cambridge)

Mathematics WJEC

Science CAIE (Cambridge)

RE (Short Course) WJEC

PE (double period) Not examined

Options subjects taken at current school:

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Currently identified level of special educational needs:

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Diagnosed medical conditions:

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Current involvement with social services or associated agencies (with postal address):

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Postcode:

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Name of any friends your child may have at BHS:

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Documents required:

Child’s passport / Visa (original)

Proof of guardianship (passport, court order or similar document)

Full birth certificate (original)

Proof of current address (utility bill, bank statement, etc)

Date from which you and your child will be available to attend BHS for interview:

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| D | D | / | M | M | / | Y | Y | Y | Y |

Office use only: photocopy and certify as true copies of the original document:

Form completed in full

Passport

Proof of guardianship

Birth certificate

Proof of address

(Other information should be written on the reverse).

Office use only: other Information:

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| **Section 1** **Student Details** Please complete this form clearly in block capitals |

Please complete the details in this Section as indicated on your child’s birth certificate. If the name entered differs from the birth certificate, please provide the relevant supporting documentation.

Student legal surname

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Student legal forename and middle name

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Student chosen name (known as) First language

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Student Address

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Postcode Student mobile number / Student school email address

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Date of Birth (DD/MM/YYYY) Gender - put a cross in the relevant box Year Group

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**Travel Arrangements** – put a cross in the relevant box

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| X | Car | X | Walk | X | Taxi/Other | X | Service Bus No ……. | X | School Bus |

**Lunch Arrangement** – put a cross in the relevant box

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| X | School Meal | X | Packed Lunch | X | Home for Lunch |

Siblings – Please add the names and date of birth of any siblings that already attend Ballakermeen High School

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| **Section 2** **Medical Details** (please put a cross (X) in the relevant box) |

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| **Statements** | Yes | No |
| Does your child have allergies (severe reactions-medically diagnosed) that the school needs to know about? (if yes, please give more details in the Medical Note section below, including if your child has been prescribed an auto-injector) | X | X |
| Does your child have asthma requiring the use of an inhaler? | X | X |
| Does your child have a medical condition that the school should be aware of?  (if yes, please give more details in the Medical Condition section below) | X | X |
| Does your child take regular medication at home that the school should be aware of? (if yes, please provide more details below) | X | X |
| Does your child have a Healthcare Action / Management Plan? | X | X |
| Does your child have any hearing difficulties? | X | X |
| Does your child have any speech/language/visionary difficulties? | X | X |

Family Doctor / Group Practice

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If your child requires medication that needs to be taken during the school day or held as a spare (i.e. epipen, asthma inhaler, diabetes medication, epilepsy medication etc.), please contact the school office. Where possible, medication should be administered out of school hours.

If your child has a condition requiring them to carry medication, please request a Form 7 “Request for Child to Carry His/Her Own Medicine” from the school office.

Please ensure that an up-to-date Healthcare Action/Management Plan is provided to the school if necessary.

If you would like to discuss your child’s medical and/or allergy conditions please contact the school office.

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| Does your child have Additional Educational Needs? (please give more details below) | X | X |

Medical Condition(s) / Notes

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| **Section 3** **Parent/Contact Details** |

**The Parent/Contact details should be completed as per the birth certificate; if the information provided below differs from the birth certificate, please provide the relevant supporting documentation. The people named below will be entered onto our database as having parental responsibility.**

Please add the persons you wish to be contacted in an emergency (usually parent/main carers) and indicate the “Priority” in which you wish for them to be contacted, i.e. 1 and 2. We use a system called In-Touch from Capita (https://www.capita-sims.co.uk/products-and-services/sims-intouch) to enable us to communicate via email or text message. Only contacts with parental responsibility will receive this type of communication.

Priority 1: **Full Name**: Mother or Father/Carer/Other Relative(please circle) **Title** Mrs/Mr/Ms/Miss (please circle)

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Current IOM address (if different from the Student Details)

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Postcode Parental responsibility – put a cross in the relevant box

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|  |  |  |  |  |  |  |  |  | Y | X | N | X |  |

Telephone numbers - Mobile number will be used for In-Touch communication

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Home |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mobile |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Work |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**In-Touch – only one email address can be used for In-Touch. Please put a cross in the email address to be used.**

**Please note that business emails sometimes have security in place which may prevent receipt of an email.**

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| Home email |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Y | X | N | X |
| Work email |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Y | X | N | X |

Priority 2: **Full Name**: Mother or Father/Carer/Other Relative(please circle) **Title** Mrs/Mr/Ms/Miss (please circle)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Current IOM address (if different from the Student Details)

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Postcode Parental responsibility – put a cross in the relevant box

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|  |  |  |  |  |  |  |  |  | Y | X | N | X |  |

Telephone numbers

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Home |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mobile |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Y | X | N | X | In-Touch – put a cross in the relevant box |
| Work |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**InTouch – only one email address can be used for InTouch, please put a cross in the email address to be used**

**Please note that business emails sometimes have security in place which may prevent receipt of an email.**

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| Home email |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Y | X | N | X |
| Work email |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Y | X | N | X |

**Dual Mail**

If parents live at separate addresses and wish to receive additional copies of correspondence issued to their child (Dual Mail), please indicate this below. Please refer to our Dual Mail Policy on the school website https://bhs.sch.im/

Mother – put a cross in the relevant box to receive dual mail Father – put a cross in the relevant box to receive dual mail

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| Y | X | N | X |  |  |  |  |  |  |  |  | Y | X | N | X |
| **Section 3** **Parent/Contact Details** **(continued)** | | | | | | | | | | | | | | | | |

Priority 3: Please add any other person that you wish to be contacted in an emergency in the event of Priority 1 and Priority 2 not being available.

**Other Contact full name**

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| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Relationship to student

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Address (if different from the student details)

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Postcode

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Telephone numbers

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| Home |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mobile |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Work |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Section 4** **Parental Consent** |

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| --- | --- | --- |
| **Educational visits** | **Yes** | **No** |
| My child may be taken on educational visits on foot or by bus (including public buses which do not have seatbelts) in order to complete school work / attend sporting events. | X | X |
| My child may be taken on educational visits by minibus (several members of staff are registered minibus drivers) in connection with school work or sporting events. | X | X |
| My child may be transported (for educational visits or sporting events) in public hire vehicles i.e. taxi, on public transport, by school minibus or in a teachers’ car where adequate insurance is in place and there is a chaperone as necessary. | X | X |

|  |  |  |
| --- | --- | --- |
| **Photograph/video/mobile device permission** | **Yes** | **No** |
| During the School year there are likely to be opportunities to publicise school activities or for students to conduct coursework using a variety of types of recording.  Such recordings may subsequently appear on the school’s website, in display material in the school’s communal areas, externally (e.g. at an exhibition promoting some aspect of the school curriculum or particular school achievement) or in the media  Ballakermeen High School has adopted certain safeguards in order to minimise any risk to your child and to allow the exercising of personal choice:   * Only appropriate images will be taken * Images will be kept securely and destroyed after their required time * Any external photographer will have the validity of their organisation checked * Appropriate levels of supervision will be undertaken at all times | | |
| Photographs of my child may be displayed within the school building or in school publications along with their forename | X | X |
| Photographs of my child may be displayed on the school website. Please note that links to our website may be added to social media sites, such as Facebook and Twitter. | X | X |
| Photographs of my child may be displayed on the school’s social media e.g Facebook and Twitter. (Please be aware that the School has no control over use of images once they are on social media) | X | X |
| Photographs of my child may be published in the media (television/web/local newspapers or magazines in connection with school activities; for example, sports events, concerts etc). I understand that in these situations my child’s photograph may be accompanied by their full name and school name.  Please note that the school does not have control of how images taken by the media are published. | X | X |
| **Section 4** **Parental Consent (continued)** |  |  |
| Individually named photographs of my child may be published in local newspapers in connection with school activities (for example, sports events, concerts etc). | X | X |
| Photograph of my child and their date of birth being printed on their dinner money smartcard. If this information is not present it will not be possible to use the smartcard as an ID card. It also increases the risk of financial loss if the card is misplaced. | X | X |
| My child can be videoed during school events/plays (this can be used for educational purposes / educational events if necessary). | X | X |
| My child using their mobile device in school for education purposes in line with the school’s ICT acceptable use policy. The full policy is on our school website along with our mobile phone policy. | X | X |
| My child can attend lessons covering sex education as part of the PSHE curriculum. Please note, all other aspects of the PSHE curriculum are compulsory, as is the ‘reproduction’ topic in the Science curriculum. | X | X |

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| --- | --- | --- |
| **Data Sharing** | **Yes** | **No** |
| I agree to my child accessing Google Suite for educational purposes, and give permission for the school to provide and manage a Google Suite account, which includes use of Google mail, Google Classroom and Google Drive | X | X |
| I agree that my child’s details may be shared with Manx Care i.e. for the organisation of HPV vaccinations, school health referral etc. | X | X |
| I agree that my child’s name and school email address may be used to make a MyMaths account. MyMaths is used to deliver teaching of Maths across all year groups and key stages in the school. | X | X |
| I understand that my child needs to access and use a variety of educational platforms, A list of these applications can be found on our website <https://bhs.sch.im/privacy-policy>, where security protocols and access conditions are explained in more detail.  I understand that accessing educational platforms may involve sharing personal data with third party applications. This data may include student name and school email address (which includes the full name of a student). Data sharing will be limited.  It is important to understand that these learning platforms are an integral part of your child’s learning. | X | X |

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| **Section 5 Parent Pay** |

ParentPay is an online payment option for paying for school meals. It enables parent/carers to pay online at a time that suits them and eliminates the need for students to carry cash or cheques to school. It is also possible to view what has been purchased, and to keep track of the student’s current balance.

|  |  |  |
| --- | --- | --- |
| **Parent Pay** | **Yes** | **No** |
| I would like access to ParentPay. Please note that if you already have an existing account set up for your child’s primary school, you are still required to tick this box.  We will then provide you with a new username and password to enable your existing account to be used at Ballakermeen High School. | X | X |

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| **Section 6 SIMS Parent App** |

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| **Parent App** | **Yes** | **No** |
| Parent App is a mobile and desktop application that allows the school to share important information with you quickly and efficiently.  This include details of your child’s timetable, attendance, reports/snapshots and conduct messages which can be accessed via an App on your mobile device.  I would like access to ParentApp – please send me an invitation and instructions on how to do so. | X | X |

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| --- |
| If you wish to withdraw your consent to any items in Sections 4 to 6 at any time, please contact the school office in writing, either by letter or via email, confirming which of the above you wish to opt out of. |

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| **Section 7 Data Processing** |

As a member of a school community it is necessary to process your information but this will only be done in accordance with Data Protection Principles. To understand how the Department of Education, Sport and Culture obtains and processes your information please visit this link: <https://www.gov.im/about-the-government/departments/education-sport-and-culture/information-and-publications/gdpr-rights-overview/>

The information you provide, and that obtained from other relevant sources, such as registers, letters you send in, forms etc will be treated confidentially and used by Ballakermeen High School to fulfill its legal/statutory obligations. Elements of this information may also be shared with third parties, as detailed on the school’s privacy notice, who support the school in the delivery of their statutory requirements, where necessary to confirm factual information provided by you, to protect public funds, including the prevention and detection of fraud and/or otherwise required by law.

**I have read and understood the above information.**

Signed: ………………………………………………….. Full Name: …………………………………………………..

Parent / Carer

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| **Section 8 Data Processing** |

**This section must be completed by a person with parental responsibility named in Section 3 (Priority 1 or 2)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I can confirm that the information given on this Data Collection Sheet is to the best of my knowledge, true. | Y | X | N | X |

Signed: ……………………………………………… Full Name: …………………………………………………..

Parent / Carer

Date: …………………………………………………….

PLEASE RETURN THE COMPLETED FORM TO:

SCHOOL OFFICE, BALLAKERMEEN HIGH SCHOOL, ST CATHERINE’S DRIVE, DOUGLAS, IM1 4BE