

# Hylands School



INSPIRE CHALLENGE ACHIEVE

## Home School Agreement and Data Collection

Dear Parent / Carer.

**The aim of Hylands School is to provide an excellent education in a safe supportive learning environment, where people are valued and make contribution to the school community and where Students go on to become responsible, independent members of society.**

In order to support the partnership between Hylands School, our students and their carers, we ask all Parents, carers and students to read each page of the following booklet, and then sign date and complete the final page, which is to be returned to school by your Child.

### **HOME SCHOOL PARTNERSHIP AGREEMENT**

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I have chosen to send my child to be educated at Hylands School and therefore agree that:

#### **Governors**

##### **As Governors to the school we will:**

- Ensure policies and procedures are in place to meet statutory regulations and local school needs
- Monitor and review all aspects of the school's work
- Seek financial efficiency and value for money

Signed: Chair of Governors

Date: July 2019

#### **The School**

##### **As a school we will:**

- Promote high expectations for student success and commitment
- Provide the highest quality of teaching and set appropriate homework which will be marked
- Accurately monitor individual student progress and report this to the parents
- Encourage high and proper standards of behaviour, demeanour and dress of our students
- Provide a clean, safe, stimulating and well-resourced environment
- Ensure accurate and prompt communications with parents on problems of behaviour, attendance, punctuality or equipment
- Care for the individual student as they progress through the school and adolescence
- Ensure its policies are implemented
- Ensure the highest levels of professionalism by all staff

Signed: Headteacher

Date: July 2019

##### **As parents/carers, we will:**

- Work in partnership with the school
- Take an active and positive interest in our child's education and have high expectations of our child's success
- Encourage the completion of homework and students' independent and extended learning
- Read and our child's student planner
- Make every effort to attend Parent Evenings
- Support the policies of the school
- Ensure the very best levels of attendance and punctuality of our child at all times
- Communicate promptly with the school on matters of concern

##### **As a student at the school I will do my best to:**

- Attend school regularly and on time
- Bring all the necessary equipment I need
- Complete all my classwork and homework to the very best of my ability
- Wear the correct school uniform and be tidy in appearance
- Be polite and helpful to others and show care, courtesy and consideration
- Keep the school free from litter and graffiti.
- Inform a member of staff immediately if I have a concern
- Adopt a positive attitude towards, and participate fully in, the life of the school



### Student Information Form



*This form must be completed and returned to Hylands School before your child starts.*

*Please note: It is essential full details are given*

#### Student Details

Surname:

Forename:

Middle Name:

Gender:

Home Address:

Date of Birth:

Place of Birth:

Nationality:

(if born abroad, date of entry into UK)

Siblings already at Hylands:

Last School Attended:

#### Parent/Carer Contact Details

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

**Please Note the priority 1 contact will be contacted if your child is absent from school without reason.**

\*PLEASE USE BLOCK CAPITALS

|   | Name and Relationship                                                                             | Parental Responsibility                    | Home Address   | Phone Numbers                     |
|---|---------------------------------------------------------------------------------------------------|--------------------------------------------|----------------|-----------------------------------|
| 1 | Mr/Mrs/Ms/Miss<br>Forename:<br><br>Surname:<br><br>Relationship to Pupil:<br><br>Language spoken: | Yes/No<br><br>Please delete as appropriate | Email Address: | Home:<br><br>Work:<br><br>Mobile: |
| 2 | Mr/Mrs/Ms/Miss<br>Forename:<br><br>Surname:<br><br>Relationship to Pupil:<br><br>Language spoken: | Yes/No<br><br>Please delete as appropriate | Email Address: | Home:<br><br>Work:<br><br>Mobile: |



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|   |                          |                              |                |         |
|---|--------------------------|------------------------------|----------------|---------|
| 3 | Mr/Mrs/Ms/Miss Forename: | Yes/No                       | Email Address: | Home:   |
|   | Surname:                 | Please delete as appropriate |                | Work:   |
|   | Relationship to Pupil:   |                              |                | Mobile: |
|   | Language spoken:         |                              |                |         |
| 4 | Mr/Mrs/Ms/Miss Forename: | Yes/No                       | Email Address: | Home:   |
|   | Surname:                 | Please delete as appropriate |                | Work:   |
|   | Relationship to Pupil:   |                              |                | Mobile: |
|   | Language spoken:         |                              |                |         |

#### **Medical Details**

Surgery Name and Address:

Surgery Telephone Number:

#### **Does your child have any of the following health issues?**

Asthma Y/N

Wears Glasses Y/N

Diabetes Y/N

Allergies Y/N Please specify:

Epilepsy Y/N

Hearing difficulties Y/N

Please specify any other health factors that the school should be aware of:

Please specify any other individual needs that the school should be aware of:

Please specify any dietary requirements:



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#### Ethnicity

- Afghan
- African-Asian
- Albanian
- Any Other Black Background
- Bangladeshi
- Black Angolan
- Black- Congloses
- Black – Ghanaian
- Black-Nigerian
- Black- Sierra Leonian
- Black- Somali
- Black Sudanese
- Black –Caribbean
- Filipino
- Greek/Greek Cypriot
- Gypsy/Roma
- Hong Kong Chinese
- Indian
- Italian
- Kosovan
- Nepali
- Other Asian
- Other Black African
- Other Chinese
- Other Ethnic Group
- Other Gypsy/Roma
- Other Mixed Background
- Pakistani
- Roma
- Thai
- Traveller of Irish Heritage
- Turkish/Turkish Cypriot
- Vietnamese
- White-British
- White- Irish
- White and any Other Ethnic Group
- White and Asian
- White and Black African
- White and Black Caribbean

First Language:

Any Other Languages Spoken:

Is English an additional language:

Date of Entry into UK:

Religion:

Asylum Status:

#### Meal Arrangements

- Free Meal
- Packed Lunch
- School Meal

#### Travel Arrangements

- Car Share
- Car/Van
- Cycle
- School Bus
- Metro/Tram
- Other
- Public Bus
- Taxi
- Train
- Walk

#### Welfare

Is the child in Local Authority Care? **Yes/No** *(If yes please give details of Social Care Contact in the contact details section on the front of this form)*

Is the child adopted? **Yes/No** *(If yes please provide a copy of the adoption certificate)*

Has your family ever received support from an external agency? *(If yes please give details?)*

#### Additional Information

Has your child ever been on the Special Education Needs and Disabilities register?

Has your child ever had support in exams? *(If yes, please give details)*

**Parent/Carer Signature:**

**Date:**



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#### **Further Information**

*(To be completed if the child's first language is NOT English)*

#### **Student's use of language**

| Language | Speaking<br>(proficiency)<br>Home/School | Reading<br>(Proficiency) | Writing<br>(Proficiency) | Used with/where? |
|----------|------------------------------------------|--------------------------|--------------------------|------------------|
|          |                                          |                          |                          |                  |
|          |                                          |                          |                          |                  |
|          |                                          |                          |                          |                  |
|          |                                          |                          |                          |                  |

#### **Previous Schooling**

| Country | Date started | Ages (from-to) | Languages used | Assessment exams/grades | Repeated years |
|---------|--------------|----------------|----------------|-------------------------|----------------|
|         |              |                |                |                         |                |

#### **Support for parents and carers:**

*Please tick relevant boxes:*

|                                                                                      |  |                                                               |  |
|--------------------------------------------------------------------------------------|--|---------------------------------------------------------------|--|
| Interpreter support at parents' meetings needed                                      |  | The parent or carer can bring an interpreter                  |  |
| Bilingual translations of school letters and leaflets would be helpful               |  | Parent/carers can arrange for school letters to be translated |  |
| Information about education system/formal assessment/exams needed for parents/carers |  | Contact details of local community groups                     |  |
| Refugee status                                                                       |  |                                                               |  |
| Asylum seeker status                                                                 |  |                                                               |  |

#### **Other information:**

|                               |                 |                 |
|-------------------------------|-----------------|-----------------|
| Asylum seeker/refugee student | Foster carer    | Social worker   |
|                               | Contact details | Contact details |
| CLA (Child Looked After)      | Foster carer    |                 |
|                               | Contact details |                 |

**Parent/Carer Signature:**

**Date:**

Please sign each within each box below and return with your child to school.

Student Name: \_\_\_\_\_

Year: \_\_\_\_\_ Form: \_\_\_\_\_ Date: \_\_\_\_\_

**As parents/carers, we will:**

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Signed (Parent/Carer) \_\_\_\_\_

**As a student at the school I will do my best to:**

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Signed (student) \_\_\_\_\_

I have read the above information and understand the responsibility my child has undertaken by using the internet within school time. I will support the school in any action that may have to be taken against my child if he/she misuses the Internet.

Signed (Student) \_\_\_\_\_

Signed (Parent/Carer) \_\_\_\_\_

I do / do not consent to my child appearing in pictures taken for inclusion in the school's website/brochure /displays etc

Signed: (Parent/Carer) \_\_\_\_\_