

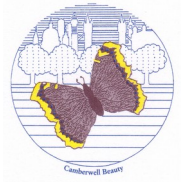


St Joseph's Camberwell Catholic Schools' Federation

Pitman Street, Camberwell, London, SE5 0TS

www.stjosephs.southwark.sch.uk

Executive Headteacher: Mrs A. Gallagher



Infants

Head of School: Ms S. Kirrane

Tel: 0207 703 9264

Fax: 020 7252 5661

Juniors

Head of School: Mr P. Reilly

Tel: 0207 703 3455

admin@stjosephs.southwark.sch.uk

Hard copies of the Safeguarding Policy are available from the school office.

School Entry Form

Please complete this form as fully as possible. It includes essential information in case of an emergency and also is for assessment of additional finance for the school and pupils' eligibility for meals provided by the school.

Child's Surname		Date of Birth	___/___/___
First name		Place of Birth	
Middle name/s		Boy_____Girl_____	
Child's Address			
Postcode		Borough of residence	
			NHS No.

Previous School/s attended

Name	Dates attended

Adult Family Members living with the Child.

Name	Relationship to child e.g. parent, grandparent, aunt, uncle.

Children in the Family

Name	Date of Birth	Nursery or School attended if appropriate

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Parent/Guardian's details

Title (please circle) Mr/Mrs/Ms/Miss

Parent/guardian 1 Last (family) Name			
Parent/guardian 1 First Name			
Telephone No. 1		Mobile Phone No. 1	
e-mail address			
National Insurance No.		Date of Birth	___/___/___
National Asylum Support Service (NASS) Number			
Address			

Title (please circle) Mr/Mrs/Ms/Miss

Parent/guardian 2 Last (family) Name			
Parent/guardian 2 First Name			
Telephone No 2		Mobile Phone No 2	
e-mail address			
National Insurance No.		Date of Birth	___/___/___
National Asylum Support Service (NASS) Number			
Address			

Names and addresses of **2** other persons who have agreed to be contacted by us in an emergency

Name		Name	
Address		Address	
Tel. No		Tel. No	

**Please be sure to inform us immediately of any changes to this information.
This is vital in the interests of the safety of your child.**

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During the course of the year, the children will be taken on educational outings by coach or by public transport to parks, museums and other places of interest in and around London.

These visits are a valuable part of the school curriculum, their purpose being to widen the children's experience of their environment and to encourage interesting discussions, story writing and topic work.

Permission for school visits

I give permission for my child _____ to be taken out of school on school visits, which may involve public or private transport.

Signed _____ Date _____

Please print parent/carer name _____

From time to time children may be involved in photography or filming either for school use or media presentations. We would be grateful if you could give written permission in advance. We will always endeavour to inform you the day before when the press or media are involved.

Permission for photographs and filming

I do / do not give permission for my child to be photographed

I do / do not give permission for my child to be filmed

Signed _____ Date _____

Please print parent/carer name _____

Mode of Travel

We have been asked to provide travel details by Southwark of how your child travels to and from school.

- | | | | |
|--------------------|--------------------------|--------------------|--------------------------|
| Public Service Bus | <input type="checkbox"/> | Cycle | <input type="checkbox"/> |
| Walk | <input type="checkbox"/> | London Underground | <input type="checkbox"/> |
| Car/Share | <input type="checkbox"/> | Taxi | <input type="checkbox"/> |
| Car/Van | <input type="checkbox"/> | Metro/Tram | <input type="checkbox"/> |
| Train | <input type="checkbox"/> | Other | <input type="checkbox"/> |

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Office Information

Prospectus given and explained

Home School Agreement given and explained

Birth certificate seen

Baptism certificate seen

Proof of address seen

Free school meal forms given