



## Welcome to The Langley Academy

This is your Admissions Pack - details of what to do are given at the start of each section. Please take time to read through both booklets carefully and complete as required

Please complete **ALL** sections in the **essential information booklet as soon as possible** and return to The Admissions Officer at The Langley Academy by 1 May 2020 at the latest. For health and safety reasons The Academy is currently closed to all visitors and therefore unable to accept hand delivered documents. Please use the Royal Mail post or preferably email [admissions@langleyacademy.org](mailto:admissions@langleyacademy.org) and we will email an electronic version for you to complete or download a copy from our website.

### Essential Documents Booklet

Documents	Page	What to do – actions required by you	Deadline for completion
The Langley Academy Code of Conduct	2	Parent/Carer and Student to read and discuss	<b>01 May 2020</b>
Admission/Data Collection Form	3-10	<b>Complete all sections</b>	
ICT Users Policy	11-12	Read and complete all sections	

## THE LANGLEY ACADEMY CODE OF CONDUCT

We want The Langley Academy to be a happy, safe and peaceful community in which to learn. Our ABC Code of Conduct is designed to ensure students and staff have high expectations and mutual respect in all their relationships at the academy.  
In addition students are reminded that TLA stands against bullying and discrimination and that, as Langley Academy students, they are expected to be proactive in fulfilling this expectation.

Our ABC Code of Conduct below explains in further detail

- the Academy expectations students follow
- the Behaviour students should avoid and
- the Consequences students will face.

# ABC CODE OF CONDUCT

<b>ACADEMY EXPECTATIONS</b>	<b>BEHAVIOUR</b>	<b>CONSEQUENCES</b>
<p style="text-align: center;"><b>I will...</b></p> <ul style="list-style-type: none"> <li>• Always keep my hands, feet and unkind words to myself</li> <li>• Always follow all instructions immediately and politely</li> <li>• Always work to the best of my ability meeting high expectations for classwork and homework.</li> <li>• Always be on time in the morning and to lessons</li> <li>• Always wear the correct uniform and bring the correct equipment / resources.</li> <li>• Always keep the academy environment clean and pleasant to work in.</li> </ul>	<p style="text-align: center;"><b>I will not...</b></p> <ul style="list-style-type: none"> <li>• Bring in valuable items</li> <li>• Bring in fizzy or high energy drinks</li> <li>• Bring in or chew gum</li> <li>• Be seen with a mobile phone in or around the academy - (6<sup>th</sup> formers may use them in 6<sup>th</sup> form block ONLY)</li> <li>• Be absent if at all possible – (requests for absences must be applied for 2 weeks in advance, medical or other appointments should be made out of academy hours – 1 day absences require a note or a phone call giving the reason)</li> <li>• Be late for lessons</li> <li>• Be seen wearing outdoor coats / hoodies / scarves/ gloves / hats in the building</li> <li>• Be seen wearing trainers</li> <li>• Be seen wearing jewellery in excess of that as allowed in the uniform policy</li> <li>• Be found eating restaurant food outside of the restaurant</li> </ul>	<p style="text-align: center;"><b>I can expect ...</b></p> <p>Confiscation Detention On call On report Parent meeting Ace placement IC placement Fixed term exclusion</p>

This has been written in consultation with the student and staff body. Parents have also been consulted.

Details of Student				
Legal Surname:		Legal Forename:		Middle Name:
Preferred Surname: <i>(if different from above)</i>			Preferred Forename: <i>(if different from above)</i>	
Date of Birth:		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		
House No/Name:		Town:		
Road/Street:		County:		
District:		Post Code:		
Details of Parent/Carer(s)				
We are required by law to keep a register of all parents of students at the Academy. This includes natural and adoptive parents and carers, all of who are entitled to vote in elections for Academy governors etc, even if they do not have custody of the child. National Insurance and Date of Birth Information is not mandatory but will allow the Academy to automatically verify your child's eligibility to additional funding streams for example Pupil Premium. This additional funding can then be used to support your child during their time at the Academy.				
Title <i>(Mr/Mrs/Ms) (please circle)</i>	First Name:	Surname:	DOB: <i>(DD/MM/YYYY)</i> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	National Insurance No: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile Telephone No:		Home Telephone No:		Work Telephone No:
Email Address: <i>(Essential as this is our preferred method of communication with you)</i>			Profession/Occupation:	
Address: <i>(if different to Student's Home Address)</i>				
Relationship to child:				
Title <i>(Mr/Mrs/Ms) (please circle)</i>	First Name:	Surname:	DOB: <i>(DD/MM/YYYY)</i> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	National Insurance No: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile Telephone No:		Home Telephone No:		Work Telephone Number:
Email Address: <i>(Essential as this is our preferred method of communication with you)</i>			Profession/Occupation:	
Address: <i>(if different to Student's Home Address)</i>				
Relationship to child:				
To whom should letters be addressed?				
Main email address for Intouch contacts, as only priority 1 is used:				

**Emergency Contacts — please indicate who should be contacted in the event of illness/emergency**

Name	Address <i>(if different from above)</i>	Telephone Number <i>(Home, Work, Mobile if different from above)</i>	Relationship to Child

**Medical Information**

Name of Doctor's Surgery/ Health Centre:	
Address:	
Post Code:	
Telephone No:	

**Medical Conditions — Please ✓ appropriate box(es) of any medical conditions your child has**

NONE	<input type="checkbox"/>	Allergy to egg white	<input type="checkbox"/>	Hayfever	<input type="checkbox"/>
Asthma (**see below)	<input type="checkbox"/>	Allergy to pulses	<input type="checkbox"/>	Heart Condition	<input type="checkbox"/>
Arthritis	<input type="checkbox"/>	Allergy to steroids	<input type="checkbox"/>	Multiple Sclerosis	<input type="checkbox"/>
Allergy to Penicillin	<input type="checkbox"/>	Allergy to seafood	<input type="checkbox"/>	Tuberculosis	<input type="checkbox"/>
Allergy to artificial colouring	<input type="checkbox"/>	Cystic Fibrosis	<input type="checkbox"/>	Hearing Impairment	<input type="checkbox"/>
Allergy to Nuts	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Vision Impairment	<input type="checkbox"/>
Allergy to citrus fruit	<input type="checkbox"/>	Eczema	<input type="checkbox"/>		<input type="checkbox"/>
Allergy to dust	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>		<input type="checkbox"/>

**Other** *(please specify):*

**\*\*Please complete the following information if you have ticked that your child has Asthma**

*Please circle*

In the event of my child displaying symptoms of Asthma, and if their inhaler is not available or unusable, I consent for them to receive Salbutamol from an emergency inhaler held by the Academy for such emergencies. If you wish to opt out of this procedure, please contact the Academy directly.

Is there any medication your child is required to carry or hold at the Academy e.g. Inhaler for Asthma, EpiPen for Nut Allergy?

**Yes**

**No**

If you have ticked **Yes**, please give details of the medication here:

Sibling Information			
Does your child have any siblings in the Academy? <i>(Please circle)</i>		Yes	No
Name of sibling		Name of sibling	
Year Group		Year Group	
House Tutor Group		House Tutor Group	

Previous Education			
Please list previous schools attended with dates. Use the Notes column to give details of any special educational provision etc.			
School Name & Address	From: (DD/MM/YYYY)	To: (DD/MM/YYYY)	NOTES
<b>Key Stage 2 Results</b> (If applicable)	English	Maths	Science

ETHNIC & CULTURAL					
Please take the time to answer these questions to help us see that your child and other children get the best out of their schooling. The government has asked schools/academies to collect this information – but you do not have to give it unless you want to. Any information you do give will be treated in strict confidence. This part is about ethnic background. It is not citizenship or nationality. Please tick the ethnic group which your child belongs to.					
ETHNICITY <i>Please ✓ one box only</i>	CODE	✓	ETHNICITY	CODE	✓
Bangladeshi	ABAN		Any Other Mixed Background	MOTH	
Indian	AIND		White & Asian	MWAS	
Any Other Asian Background	AOTH		White & Black African	MWBA	
Pakistani	APKN		White & Black Caribbean	MWBC	
Black African	BAFR		Information Not Yet Obtained	NOBT	
Black Caribbean	BCRB		Any Other Ethnic Group	OOTH	
Any Other Black Background	BOTH		Refused	REFU	
Chinese	CHNE		White British	WBRI	
Any Other White Background	WOTH		White Irish	WIRI	
Gypsy/Roma	WROM		Traveller of Irish Heritage	WIRT	

Languages Spoken <small>(please ✓ appropriate box(es)):</small>							
Language	Speak	Read	Write	Language	Speak	Read	Write
Arabic (Specify):				Hindi			
Bengali				Polish			
Cantonese				Urdu			
English				Punjabi			
French				Spanish			
Another Language, Specify				Another Language, Specify:			
<b>Students First Language</b> <i>(Please Specify)</i>							
<b>Students Home Language(s)</b> <i>(Please Specify)</i>				<b>Which language(s) are spoken at home?</b>			
<b>English as an Additional Language</b> YES <input type="checkbox"/> NO <input type="checkbox"/> EAL - Was the 1st language spoken by your child, a language OTHER than English?				<b>Languages studied at KS2:</b> <b>KS3 languages – tick if you have a preference.</b> <i>Please note we can't guarantee a language but we will try our best.</i> French <input type="checkbox"/> Spanish <input type="checkbox"/>			

Religion <small>(please ✓ appropriate box)</small>			
Please tick one box only. Some religions may have more than one denomination. If you wish, you can say which denomination on the space at the bottom of this section.			
Buddhist			Sikh
Christian			Other (Please specify):
Hindu			No Religion
Jewish			Refused
Muslim			DENOMINATION:
Nationality			
<b>Nationality</b> <i>(Please state):</i>			
<b>Country of Birth</b> <i>(Please state):</i>			
<b>Date of Arrival in the UK</b> <i>(Please state):</i>			

## Equality Questionnaire

The Equality Act places a duty on public bodies to:

- Promote equality
- Eliminate discrimination that is unlawful under the Disability Discrimination Act (1995)
- Eliminate disability related harassment
- Promote positive attitudes
- Encourage participation
- Take steps to meet disabled people's needs

We therefore need to know which of our students may have any 'disability' covered by the Equality Act. Please tick the appropriate boxes below to show which disability or medical condition applied to your child.

**NB** A child has a disability if she/he has a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day-to-day activities. The term 'disability' includes medical conditions such as heart disease, diabetes, severe disfigurement, depression, schizophrenia, dyslexia, epilepsy, Downs Syndrome, physical and sensory impairments. It also includes learning difficulties such as SpLD (Dyslexia, Dyspraxia etc), ADD, ADHD, MLD, SLD, SLCN, ASD (including Asperger's Syndrome).

SEND	Yes	No	Description/Details
Has a visual impairment			
Wears glasses all the time			
Wears glasses – distance			
Wears glasses - reading			
Has a hearing impairment			
Wears a hearing aid			
Has an Educational Health Care Plan (E H C Plan)			
Has a reading difficulty			
Has been diagnosed as Dyslexic			
Has a spelling difficulty			
Has poor handwriting			
Has been diagnosed with Dyspraxia			
Has difficulty concentrating			
Has difficulty sitting still			
Has been diagnosed as ADHD			
Has a speech difficulty			
Has social difficulties			
Has Aspergers / Autistic Spectrum Disorder			
Has difficulty with Mathematics			
Has any other difficulties			

## YOUNG CARER

Please give details:

## Lunchtime Arrangements / Dietary Needs (please ✓ appropriate box(es))

Academy Meal	<input type="checkbox"/>	Gluten Free	<input type="checkbox"/>	No Nuts of any type	<input type="checkbox"/>	Vegetarian	<input type="checkbox"/>
Packed Lunch	<input type="checkbox"/>	Halal (No Pork)	<input type="checkbox"/>	No Wheat	<input type="checkbox"/>	None	<input type="checkbox"/>
Free School Meals **	<input type="checkbox"/>	Kosher	<input type="checkbox"/>	Observes Ramadan	<input type="checkbox"/>	Other <small>(please specify)</small>	<input type="checkbox"/>
	<input type="checkbox"/>	No Dairy Produce	<input type="checkbox"/>	Sikh/Hindu Diet (No Beef)	<input type="checkbox"/>		

\*\* If your child is entitled to Free School Meals, please enter your details in the Parent/Carer section of this form. We will need your Surname, Date of Birth and National Insurance Number to process your claim through the ECS service provided by Slough Borough Council. More details about Free School Meals can be found in the Additional Information Document.

## Transport to the Academy (please ✓ appropriate box)

1. Walking	<input type="checkbox"/>	5. Coach/Mini bus	<input type="checkbox"/>
2. Cycling	<input type="checkbox"/>	6. Taxi	<input type="checkbox"/>
3. Car	<input type="checkbox"/>	7. Other	<input type="checkbox"/>
4. Service Bus	<input type="checkbox"/>		

## Student Photographs

I understand that The Langley Academy may take photographs of students at the Academy and use these images in the prospectus as well as on the website or on project display boards around the Academy. From time to time, the Academy may be visited by the media who will take photographs at certain events. Students will often appear in the images, which may appear in local or national newspapers or on televised news programmes. I give permission for my child to be included in these photographs when necessary.

Agree

Disagree

## Academy Trips and Visits

I give permission for my child to attend Type I visits as defined in the Academy's Health and Safety of Students on Education Visits Policy (available via the Academy website). I understand that some trips and visits may return and/or depart outside of the normal Academy day. Details of this will be provided on an information letter and no further consent will be required.

There are two categories of Type I visit:-

- R: regular, routine off-site activities. (e.g. the use of off-site facilities for PE)
- S: specific, one-off or occasional visits. (e.g. museum visits, field study visits)

Agree

Disagree

## Medication

I give permission for my child to self-medicate, if required, on off-site activities and understand that although supervision will be provided by the Academy in accordance with the Academy's Health and Safety of Students on Education Visits Policy, a trained first aider will not necessarily be present.



### **Home in Emergency**

In rare and very exceptional circumstances such as a sudden deterioration in weather conditions, we may need to release your child early during the Academy day in order to ensure their safe return home. It is now our Policy, that in the event of such unusual circumstances, we release the students without having to inform the parents. We do this as students and staff need to get home as quickly as possible and the weather can turn rapidly and travelling home can become extremely dangerous so students will not be looked after at the Academy.

In the event of closing the Academy, all students will be told to contact you through their mobile phones or the use of a friend's mobile.

Given that our weather forecasting service is pretty accurate, you should be able to plan for this by ensuring that your child has a house key and perhaps advising them to walk home with a friend or sibling.

The Academy will contact parents/carers via text/email to inform you of our decision to close. We will also leave a message on the Academy answerphone and on the website as well as informing the local radio stations and the local authority.

### **Emergency Medical Consent**

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present. I understand the extent and limitations of any insurance cover provided.

### **Permission to Share Details**

By signing this form, you give The Langley Academy Trust permission to share these details with Slough Borough Council, as required, to check the free school meal and other funding eligibility of your child during their time as a student within the Trust. Slough Borough Council may share these details with other sources as allowed by law to verify ongoing entitlement.

### **Safeguarding**

The Langley Academy takes the safeguarding of its students very seriously. It is the responsibility of the legal parent/carer to inform the Academy in writing of any issues that may compromise the safety of students. i.e. Sole Contact.

**Additional Information – ACADEMY USE ONLY**

Please make any notes which might be useful about the student and or their family on this sheet. For example, information relating to SEN issues, numeracy, literacy, EAL, concerns regarding health. What do they enjoy or are good at, dislikes or difficulties, friends and sibling etc.

Admission No:	UPN:
Admissions Date:	Banding:
Buddy:	House & Registration Group:

Additional Information

<b>Only Students allocated on distance need to produce proof of address Have the following forms been completed / discussed</b>	<b>YES</b>	<b>NO</b>
Proof of Address Details <i>(please circle)</i>	Photocopied	To Follow
Child Benefit Documentation	Photocopied	To Follow
Utility Bill	Photocopied	To Follow

**I understand that The Langley Academy will refer to the information provided on this form for activities both on and off-site. I also confirm that I will inform the Academy of any changes to this information immediately, so the safety of my child is not compromised.**

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

Print Name: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

## THE LANGLEY ACADEMY ONLINE USAGE POLICY

### AIM OF THE ACADEMY

To provide unique and enriching opportunities for all

### PRINCIPLES

#### **The Langley Academy Online Usage Policy**

This Policy applies wherever access to The Langley Academy Network (LAN). This policy applies whenever information is accessed through LAN whether the computer equipment used is owned by The Langley Academy or not. The policy applies to all those who make use of the LAN.

The Langley Academy owns and administers the policy.

### PURPOSES

#### **Security**

- This Policy is intended to minimise security risks. These risks might affect the integrity of The Langley Academy's data, the Authorised LAN User and the individuals to which the LAN data pertains. In particular these risks arise from:
  - The intentional or unintentional disclosure of login credentials
  - The wrongful disclosure of private, sensitive, and confidential information
  - Exposure of The Langley Academy to vicarious liability for information wrongfully disclosed by authorised users

#### **Data Access**

- This Policy aims to ensure all relevant aspects of the Data Protection Act (1998) and Fair Processing Policy are adhered to
- This Policy aims to promote best use of the LAN system to further the communication and freedom of information between The Langley Academy and Parents/Carers

### GUIDELINES

The LAN system is provided for use only by persons who are legally responsible for student(s) currently attending the Academy.

Access is granted only on condition that the individual formally agrees to the terms of this Policy.

The authorising member of academy staff **must** confirm that there is a legitimate entitlement to access information for students the names of whom must be stated on the Online Usage Policy Declaration.

A copy of the form will be held by the Academy for audit purposes.

#### Personal Use

Information made available through the LAN system is confidential and protected by law under the Data Protection Act 1998. To that aim:

Users must not distribute or disclose any information obtained from the LAN system to any person(s) with the exception of the student to which the information relates or to other adults with parental/carer responsibility.

Best practice is not to access the LAN system in any environment where the security of the information contained in the LAN system may be placed at risk e.g. a cybercafé.

#### Password Policy

You must assume personal responsibility for your username and password. Never use anyone else's username or password.

You must always keep your individual username and password confidential. These usernames and passwords should **never** be disclosed to anyone. Passwords and usernames should never be shared.

In some instances, users may be given the right to change the LAN password from the one originally issued by the Academy. If this is the case the following rules must be followed:

- Passwords must be at least 6 characters (a-z, 0-9) in length
- Passwords must contain at least 1 number (0-9)
- Passwords must not be similar to your own name or username for example: campbell1

### Questions, Complaints and Appeals

LAN users should address any complaints and enquiries about the LAN system to The Langley Academy in writing to The Head of ICT.

The Langley Academy reserves the right to revoke or deny access to the LAN system of any individual under the following circumstances:

- The validity of parental/carer responsibility is questioned
- Court ruling preventing access to child or family members is issued
- Users found to be in breach of the LAN usage policy

If any child protection concerns are raised or disputes occur the Academy will revoke access for all parties concerned pending investigation.

**Please note:** Where the LAN access is not available The Langley Academy will still make information available according to Data Protection Act (1998) law.

*Users are liable for any potential misuse of the system and/or breach of the data protection act that may occur as a result of failing to adhere to any of the rules/guidelines listed in this document.*

### The LAN Online Usage Policy Declaration

**Please only sign if you have fully read the Online Usage policy. By signing the acceptance form you are agreeing that you have fully understood the terms and conditions and all the instructions/policies of the LAN.**

Please contact The Head of ICT at The Langley Academy if you are not sure of any policies and terms and conditions of use.

#### Declaration

I hereby confirm that I have read and fully understood the terms and conditions document attached and will strictly follow the policies of the usage of the LAN.

Parent Signature \_\_\_\_\_

Parent/Carer Name \_\_\_\_\_

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

Address \_\_\_\_\_

Parent Email address \_\_\_\_\_

Mobile number \_\_\_\_\_

THIS SECTION MUST BE COMPLETED