



GRANGE INFANT SCHOOL

PART 1 - HOME SCHOOL AGREEMENT

Child's name: _____ **(please print)**

Dear Parents/Carers

We send this out at the start of each year to keep our records up-to-date. All schools are encouraged to have such an agreement. It's quite long but it helps keep your child safe and stops us pestering you too often, so it's worth it in the long run!

For the Pupil

- I will follow the values of our school vision.
- I will aim to achieve to the best of my ability.
- I will behave in a way that is respectful to others.
- I will care for my school and the people in it.
- I will be independent in my learning and thinking.
- I will show respect for my friends, teachers and school property.
- I will always try to do my best and think carefully about what I need to learn next.
- I will look after all the things I use at school.
- I will do my homework and tell you about the things I learn at home with my family.
- I will bring my Reading Book to school every day.
- I will tell my Teacher or another adult if anything is worrying me.

Pupil's signature _____

For the Parent/Carer

To help my child achieve their best I will:

- Ensure the school has up-to-date contact numbers at all times.
- Ensure my child attends school regularly and on time. Provide an explanation if my child is late and notify the office before the start of the school day on the first day of my absence.
- Avoid making holiday requests within term time.
- Make sure my child attends school properly dressed and equipped to work (with PE Kit, Water Bottle, Book Bag, and appropriate outside clothing).
- Support the school's values, working with the school to achieve excellent behaviour.
- Support learning by completing homework, attending information workshops and parents' evenings.
- Inform the school of any concerns, changes or problems that may affect your child eg a new baby.
- Reply to school correspondence as necessary.
- Engage with the school as required by staff in order to support the learning of my child.

Parent/Carer signature _____ Date: _____

The School

To help your child achieve their best we will:

- Provide a caring, happy environment where children and their families feel welcome.
- Provide regular opportunities for children to talk about their learning with adults and other children, so they can confidently talk about how to get better at things and identify ways that can help them to do this.
- Praise children for the effort they apply to their learning.
- Create an ethos where children are unafraid of making mistakes and are confident to try new challenges.
- Keep children safe and value their sense of well-being.
- Keep parents informed regularly of progress in all aspects of school life.
- Contact parents if we have any concerns regarding, punctuality and attendance or learning difficulties.
- Set children regular homework tasks to extend their learning.
- Inform parents regularly of class topics.



Collection of Early Years (EY), Year One (Y1) and Year Two (Y2)

We will not let your child leave school with anybody who you have not given permission for. Please name below adults who have permission to collect your child:

Main Carer	
Adult One	
Adult Two	
Adult Three	
Adult Four	

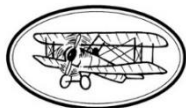
If there are any changes in this arrangement, I will telephone the office or inform the class teacher verbally or in writing on the day. If someone arrives to collect your child who we do not know and we have not been notified about, we will need telephone confirmation from you before releasing your child.

Uniform	I have read and support the uniform policy (Policy is on the website or available from the office)	<input type="checkbox"/> Please tick
Behaviour	I have read and support the behaviour policy (Policy is on the website or available from the office)	<input type="checkbox"/> Please tick
Local visits	I give permission for my child to go on local short trips in the minibus and by walking. This may include the church and local area walks.	<input type="checkbox"/> Please tick
Head lice	I give permission for school staff to check my child's hair should it be suspected that there is the presence of head lice.	<input type="checkbox"/> Please tick
Milk EARLY YEARS ONLY	I would like my child to have free milk.	<input type="checkbox"/> Please tick
Plasters	I give permission for my child to have a plaster if required. I confirm that my child has not got an allergy to plasters	<input type="checkbox"/> Please tick
Food prep/tasting ALLERGIES	<p>I give permission for my child to take part in food tasting sessions.</p> <p>My child MUST NOT EAT: _____</p> <p>Parental consent in writing for food preparation and cooking activities which is to include permission to handle ingredients and equipment (specifically knives) under one-to-one supervision.</p>	<input type="checkbox"/> Please tick <input type="checkbox"/> Please tick

Parent's signature: _____ Date: _____

If you have any enquiries or concerns please, as ever, contact us so we can help you. Your support is much appreciated.

Mrs S Duffy
Headteacher



GRANGE INFANT SCHOOL
PART 2 - HOME SCHOOL AGREEMENT

Dear Parents/Carers,

Occasionally a child will come to us with a minor pain (e.g. an earache or headache) and it would bring them some comfort if we could administer a small dose of paracetamol.

This would only be done with your prior permission and we would imagine any such occurrence to be rare.

The school will only give a dose of paracetamol if a child complains of pain after giving the child a drink, sitting them quietly or letting them lie down for a while. If the pain does not ease we will contact you by phone to ask permission to give a dose of paracetamol. (The dose will be the recommended dose for the child's age) A written record will be kept when the paracetamol is given.

It is also a legal requirement that we have written permission from you before it is given. We have published the policy on our website and if anyone wants a paper copy of it please just ask at the school office.

Once you have read the policy we'd be grateful if you would complete the attached tear-off slip below, which asks you to indicate your consent to the school giving Paracetamol liquid suspension in the event of headache, etc.

Even once we have written permission we will still contact you by phone for your verbal consent before any paracetamol is given and to confirm if your child has taken any medicines before attending school. Please ensure that you have an up to date contact number listed on the tear-off slip and inform the office of any changes.

Please note Paracetamol will not be issued without both written and verbal consent.

Administration of Paracetamol

I (Print name) ***give / do not** give permission for Paracetamol
Liquid suspension to be given to my child (named below) in the event of headache, toothache, etc. (* Please delete)

Child's name: _____

Parent/Carer signature _____ Date: _____