Scholengroep Holland stichting openbaar primair onderwijs



Secretariaat en bestuursbureau

A Eerste Tochtweg 11c P 2913 LN Nieuwerkerk aan den Ussel

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E info@scholengroepholland.nl

www.scholengroepholland.nl

# **Registration form**

for Primary School



Name school : Openbare Dalton basisschool De Klipper

Address : Oudelandselaan 141, 2652ER Berkel en Rodenrijs Gouden Uillaan 28, 2652 KJ Berkel en Rodenrijs

Phone number : 010-5113280

- E-mail : directie@daltondeklipper.nl
- Website : www.daltondeklipper.nl

#### Please fill in this registration form as completely as possible.

Undersigned, Name:

Requests admission of his/her son/daughter/foster child as a student of the

Name of the school:

Group:

Preferred location (Oudelandselaan or Gouden Uillaan):

### Personal details student

Last name/ Surname		Prefix:
Given names		
First name		
Use different name?	Yes / No	
If yes, which one		
Gender	M / F	
Date of birth		(dd-mm-yyyy)
Address		
Zip code + City		
Phone number		Confidential: Yes / No
E-mail address		
Country of birth child		
City of birth child		
First Nationality child		
Second Nationality child		
Date in Netherlands		(dd-mm-yyyy)
Spoken language at home		
Social security number (BSN)*		~
Identity card / passport	Original checked:	Date:
<u>* It is mandatory to enclose a copy of the</u>		
SSN (BSN) number on your ID. The copy will	<i>и</i>	
be immediately destroyed after checking and not kept.	(Initials)	
Country of origin caregiver 1		~
Country of origin caregiver 2		
Early childhood education (VVE)	Yes / No	
participation for the Dutch language.		
VVE program name		

Ontwikkelen in vertrouwen. Vertrouwen in ontwikkelen.

### General practitioner (GP) and medical data

Last name doctor / GP		
Address		
City		
Phone number		
Medicines / Medical data		
Consultation office for	Has your child had all the vaccinations?	Yes / No
regular developmental check		
Allergy		
Products that child is not		
allowed		

### Family

Number of children in the	
family	
Place child within family	
Emergency phone number	
Name emergency contact	

### Personal details caregivers

	Caregiver 1	Caregiver 2	
Last name			
Initials			
First name			
Gender	M/F/O	M/F/O	
Relationship to child	Father / mother /	Father / mother /	
Date of birth	(dd-mm-yyyy)	(dd-mm-yyyy)	
Country of birth			
City of birth			
Profession			
Highest level of education**			
Graduated	Yes / No	Yes / No	
If no, number of years of			
training			
Work phone no.			
Cell phone no.			
Home phone no.			
Home phone no. secret	Yes / No	Yes / No	
Address			
Zip code + City			
E-mail address (newsletter)			
Marital status			
Parental authority	Yes / No	Yes / No	
Single parent family			

### Other information

	1
Name and address responsible person if a	
guardian has been appointed	
Name daycare / kindergarten / previous school	
Permission to request additional information	Yes / No
from prev. institution	
Other important information	
Contact external authorities:	
Office for special educational needs	Yes / No
(Samenwerkingsverbanden PPO)	
Ambulatory care	Yes / No
(Youth) Mental health care	Yes / No
((J)GGZ)	
Youth care and welfare	Yes / No
(Jeugdhulp / kernteam)	
Consultation office for regular developmental	Yes / No
check	
(Consultatiebureau)	
other:	
ł	

### School career child

Does the child currently	Yes / No		
attend school?			
Name school			
Type of school			
Phone number			
Contact			
Grade / level			
	fro	om	till
Previously attended schools	fro	om	till
	fro	om	till
Repeat school year	Yes / No		
Which grade/ level			

comments:		
	1	
Did you have a guided tour in the school?	Yes	No

Ontwikkelen in vertrouwen. Vertrouwen in ontwikkelen.

This registration form must be signed by both parents. What if you are divorced?

- If there is co-parenting, both parents must sign.
- In other cases, only the parent/guardian who has parental authority signs.

The undersigned declares that this form has been completed truthfully

O Parent 1 O Caregiver 1 O Guardian 1	O Parent 2 O Caregiver 2 O Guardian 2
Date	Date
City	City
Signature	Signature
To be completed by IB	To be completed by management
Datum ontvangst:	Datum ontvangst
Datum contact PSZ/KDV/Gastouder	Inschrijving definitief: ja / nee
	Komt per (datum)
Handtekening IB:	Handtekening directie:
Attachment:	
<ul><li>Consent to publish visual material</li><li>Parent statement</li></ul>	

• Privacy statement and 'schoolgids' can be found on our website: www.daltondeklipper.nl

# General explanation on registration form

### **Declaration school**

The information you provide within this form will be treated confidentially and is only available for inspection by:

- the school's management and team members;
- the education inspectorate;
- the Government Accountant of the Ministry of Education, Culture and Science

When processing this data, we comply with the General Data Processing Regulation.

Every parent/caregiver has the right to inspect and correct any incorrect data of the student administration that relates to his or her child.

### \*Explanation social security number (BSN)

It is not necessary to request an extract from the municipal personal records database (GBA). The health insurance card cannot be used to register your child, because this document is not issued by the government.

Note: Please bring the original ID cards or passports of those listed on the form so that we may check them. No copies will be made nor kept of any identification documents.

### \*\*Explanation education data

By signing you agree that the education/training data will be checked.

# Please complete this form <u>per child</u>, <u>once</u> for the entire school career at De Klipper. If there are any changes, please let us know and we will adjust it.

## Permission to publish images

Photos, film and/or video recording may be made of your children during school activities. By means of this form you can indicate in certain areas for which you do or do not give permission. This permission applies for the entire period that your child stays at our school, unless you withdraw (in parts) your permission.

Consent is granted by those who have legal parental authority. If both parents have authority, then both sign, even if the parents are divorced. Consent is granted for each child individually.

You can withdraw your consent at any time and/or change parts of it. You must withdraw consent for each child individually. Published images that are still available on our website, social media or on the student board in the classroom will be removed. It is not possible to remove previously published images such as school papers or brochures.

Withdrawal of consent must be done in writing and requires the signature of both parents.

During school trips, sports days, etc., parent volunteers will join and accompany them. We will instruct these volunteers on creating and publishing images for their own social media accounts and inform them which children may not be photographed or filmed. As a school, we cannot be held liable for the fact that these parents may still produce images on which your child is recognizable.

#### Tick the parts for which you grant permission.

- O taking photos, video/film during (sports) activities
- O taking pictures and posting them on the school app 'Klasbord' (Klasbord is our communication app on which the pictures are only visible for parents and staff who have access to the app.)
- O taking the annual class photo
- O publishing images in which my child is not recognizable in the image. (e.g. filmed/photographed from behind or blurred)
- O Taking pictures by the school photographer
- O publishing the images in the newsletter
- O publishing the images on social media
- O taking photos, video/film during stage performances, including the closing performance in group 8
- O publishing the images on the school's website

#### Data provision to third parties

- As the pupil's parent/carer, I am / am not (cross out what is not applicable) a member of the parents' association.
  If yes, I give permission to transfer some personal data to the parent council, namely: name and group number of my child
  If you do not wish for this, you must explicitly indicate this in the "comments" box.
- By signing you give permission to share name and address details, date of birth and e-mail address for the purpose of borrowing and reserving books in the context of the library at school, if present at your school of application.
   If you do not wish for this, you must explicitly indicate this in the "comments" box.