



# **HARMONIZE ACADEMY**

## **ADMISSIONS POLICY**

<b>POLICY WRITTEN BY:</b>	<b>PRINCIPAL</b>
<b>DATE POLICY PREPARED:</b>	<b>MARCH 2013</b>
<b>DATE FIRST RATIFIED BY GOVERNING BODY:</b>	<b>APRIL 2013</b>
<b>DATE REVIEWED:</b>	<b>SEPTEMBER 2025</b>
<b>DATE FOR NEXT REVIEW:</b>	<b>SEPTEMBER 2026 Annual</b>

**Trust, Respect, Compassion, Forgiveness**

# ADMISSIONS POLICY

Harmonize Academy is an alternative provision free school for students in years 9-11 who are not coping in mainstream education. This includes students who are at risk of exclusion, who have excluded themselves as well as those who have been excluded from mainstream education.

Referral is made either privately, through Schools/Academies, or through the LA Fair Access Panel.

## Admission is based on the following 2 criteria

Can Harmonize offer the learners suitable education and support

Does the student present with behaviour, both social and learning, that enables them to be safely supported by current staffing levels and the resources available to the school.

Students who pose a significant safety risk to themselves or others are not able to be accepted at Harmonize.

## LEGISLATION AND GUIDANCE

This policy refers to the requirements of the School Admissions Code [https://assets.publishing.service.gov.uk/media/60ebfeb08fa8f50c76838685/School\\_admissions\\_code\\_2021.pdf](https://assets.publishing.service.gov.uk/media/60ebfeb08fa8f50c76838685/School_admissions_code_2021.pdf) from the Department for Education (DfE).

<https://www.gov.uk/schools-admissions>

## REFERRAL PROCEDURE AND TARGETS

1. Referral received and logged. Information gathered
2. Student contacted by phone/mail
3. Interview (on-site) with support worker/mentor and parent/s/carers
4. Further information gathering at interview
5. Decision made at end of interview
  - If suitable, start on Introduction Programme and six week trial
  - If not suitable, refer back to School or LA.

## **ADMISSIONS PROCEDURE**

Admission starts with an Individual Learning Plan for an introduction program, discussed with the student and parents/carers. There then follows a six week introductory period that acts as a time for assessment. This period can vary in length and intensity, depending on the student. For example, for some learners it is inappropriate to do formal testing straight away because of their level of disaffection; for others their attendance may be the main issue.

In the case of being unsuitable for a student we will try our utmost to secure a more appropriate placement for the student, as well as help them and their parents/carers to understand the reasons why the student is not suitable.

This cautious approach also aims to eliminate the need for exclusions from Harmonize Academy.

## **ONWARD REFERRAL**

Students are referred onward before their leaving date if they present with learning or behavioural problems that are not suitable for Harmonize Academy. This is a SLT decision and the reasons are documented in the student file. In all circumstances we will undertake to refer the student on to a more appropriate learning facility or back to the Fair Access Panel or the Local Authority or the referring school.

## **RISK ASSESSMENT**

The following chart (part of our Behaviour Support Plan) is used to assess risk at admission and is also used to determine behaviour and disruption levels during the day. If a student is troublesome a monitoring process is established to assess the student, their behavioural triggers, effectiveness of guidance and risk to other students.

## **ADMISSIONS REGISTER**

Harmonize Academy maintains an Admissions register showing the student referred, the source of referral, year group and date of admission. Attendance is monitored in every lesson and reported to referring schools/LA every day.

# HARMONIZE BEHAVIOUR SUPPORT PLAN PROCEDURES

## i. Behaviour Levels

Level	DESCRIPTION
1* / 1	<ul style="list-style-type: none"> <li>• No incidents in the classroom</li> <li>• No incidents at other times</li> <li>• A successful student</li> <li>• Self-motivated</li> </ul>
2	<ul style="list-style-type: none"> <li>• Classroom disruption</li> <li>• Incidents between class</li> <li>• No risk to others</li> <li>• Settles when told</li> </ul>
3	<ul style="list-style-type: none"> <li>• Refusing to work</li> <li>• Refusing to co-operate</li> <li>• Constant disturbance in class</li> <li>• Verbal abuse to people on site</li> <li>• Significant safety risk from careless, reckless or aggressive behaviour</li> </ul>

## ii) Response Hierarchy

All staff members are requested to use the following hierarchy to deal with unwanted behaviour:

Managed in classroom Level 1* / 1	<ul style="list-style-type: none"> <li>• Praise and rewards for positive behaviour</li> <li>• Certificates</li> <li>• Telephone call home- Postcards</li> <li>• Acknowledgement of academic learning and progress</li> </ul>
Managed in classroom Level 2	<ul style="list-style-type: none"> <li>• A look, point, signal, joke, any other strategy</li> <li>• Positive behaviour strategies- see staff training manual</li> <li>• First reminder</li> <li>• Final reminder</li> <li>• Behaviour recorded on monitoring card</li> </ul>
Elevated to manager level Level 3	<ul style="list-style-type: none"> <li>• First incident – called out of lesson for discussion with SLT</li> <li>• Incident Report to be completed by member of staff</li> <li>• Decision made by SLT on appropriate consequence</li> </ul>

# 1. STUDENT CONTACT FORM

Young Person's Details					
<b>Name</b>					
<b>DOB:</b>		<b>ETHNIC ORIGIN</b>	<b>GENDER</b>		
<b>AGE:</b>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px; text-align: center;"><b>M</b></td> <td style="width: 50%; padding: 2px; text-align: center;"><b>F</b></td> </tr> </table>	<b>M</b>	<b>F</b>
<b>M</b>	<b>F</b>				
<b>Address</b>					
<b>Priority Contact Name</b> <b>Relationship</b> <b>Contact Number(s)</b>					
<b>Priority contact email address:</b>					
<b>Student email address:</b>					
<b>Emergency Contact Name</b> <b>Relationship</b> <b>Contact Number(s)</b>					
<b>FSM Ref if applicable</b>	<b>UCI:</b>	<b>ULN:</b>	<b>UPN:</b>		
<b>EHAT</b> <input type="checkbox"/> <b>CIN</b> <input type="checkbox"/> <b>CP</b> <input type="checkbox"/> <b>Other Agencies</b> <input type="checkbox"/> <b>Young carer</b> <input type="checkbox"/>					
<b>Contact Details:</b>					
<b>Pre-Harmonize Attendance %</b>					
Placement Details					
<b>Interview date</b>		<b>Start Date</b>			
<b>Year Group</b>		<b>Group Allocated to</b>			
<b>Days Attending Harmonize Academy:</b>					

## 2. Referral Form

Young Person's Emergency Contact & Consent Form			
Name		Parent/Carer	
Address			
Tel No.		Mobile No.	
ANY HEALTH ISSUES WE SHOULD BE AWARE OF (To be treated in the strictest confidence)			
<p><b>Parental Consent Form</b>            Regarding my child, I give my permission for .....</p> <p><b>Off site Activities and Trips</b></p> <p>a) To take part in school trips and other activities that take place off school premises YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>b) To be given first aid or urgent medical treatment during any school trip or activity. YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>c) The trips and activities covered by this consent include; YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p style="margin-left: 20px;">a. all visits (including residential trips) which take place during the holidays or a weekend</p> <p style="margin-left: 20px;">b. adventure activities at any time</p> <p style="margin-left: 20px;">c. off-site sporting fixtures outside the school day,</p> <p style="margin-left: 20px;">d. all off-site activities for nursery schools.</p> <p>d) The school will send you information about each trip or activity before it takes place.</p> <p>e) You can, if you wish, tell the school that you do not want your child to take part in any particular school trip or activity.</p> <p>Written parental consent will not be requested from you for the majority of off-site activities offered by the school – for example, year-group visits to local amenities – as such activities are part of the school's curriculum and usually take place during the normal school day.</p> <p><b>Marketing &amp; Research Consent</b></p> <p>I give my consent for any photographs or video footage recorded during the course to be used in promotional material, by the organisation and funders. YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>I agree to any findings from the project being shared publicly. YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p><b>Medical Consent</b></p> <p>In the event of any accident or illness, I consent to any necessary medical treatment (which may include the use of anaesthetics) by a recognized qualified person providing that every effort has been made to contact me and failed and if the delay in obtaining my own consent is considered inadvisable by the medical professionals concerned. YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p><b>Data Share</b></p> <p>Data records held by the school may be shared with relevant external agencies and I confirm that I have been given a Privacy Notice regarding how school uses my child's personal data. YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Parents and carers have the right to withdraw consent for any of the above at any time.</p>			
Signed		Date	

**Young Person's Background: Please tell us as much useful information as possible that will help us when working with this young person.**

Previous School/PRU:		LEA:	
Reason for referral onto course?		Does the young person have any special learning needs? Eg dyslexia, large print, basic skills needs	
Does the young person have a criminal record or are they subject to any orders? If yes please state.		Does the young person have a medical condition? Eg ADHD, asthma, epilepsy. allergies	
Please describe the young persons background eg behaviour, school history, why they were excluded from school and any other relevant information.			
<b>Allergies:</b>	<b>Areas for concern</b> Drug/Alcohol abuse <input type="checkbox"/> Suicide/Self Harming <input type="checkbox"/> Violence <input type="checkbox"/> Relationships <input type="checkbox"/> Arson <input type="checkbox"/>	If you have ticked any of the boxes please give more details (please attach a separate piece of paper if you need to):	
Any other information you feel is important for us to consider. (please attach any reports relevant to this applicant)			
<b>Payment/Invoice details:</b>			
Contact Name:		Address:	
Signed:		Date:	

*All information recorded in this form will be treated in the strictest confidence.*

# Harmonize Academy

## 3. Student Learner Agreement

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

*I will:*

- Participate in all lessons, arrive on time and attend every day
- Be focused and follow instructions
- Support others by not bullying to help build trust and report any bullying, vandalism or racism to a member of staff
- Respect the room, equipment and other parts of the building
- Take responsibility for my own behaviour
- Respect the No Touch rule and keep my hands and feet to myself
- Help support others who may be having a difficult day
- Take support from staff if I am feeling angry or upset
- Respect the No Swearing at Any Time rule and respect others at all times
- Hand in mobiles, iPods etc to staff at the start of the day
- Listen to others – One speaker
- Only eat food and drinks during breaks and clean up afterwards
- Not smoke or vape in the building or outside areas
- Not bring or use alcohol or drugs/drugs paraphernalia on the premises  
*(I understand that if a member of staff suspects that I have taken drugs or alcohol, I will be sent home)*
- Not leave the premises without permission
- Obey Health and Safety Rules, act sensibly in ways that do not endanger myself or others
- Come prepared for sessions with appropriate equipment, clothing etc.

**Aim to achieve, be an active and valuable member of the School  
and enjoy my time at Harmonize Academy!**

Signed: .....

Date: .....



# Harmonize Academy

## 3. Parent(s)/Guardian(s)/Carer(s) Agreement

I/we will:

- See that my/our child attends regularly, on time, appropriately dressed and properly equipped for all lessons.
- Inform the Academy as soon as possible on the first day of absence if my/our child is unable to attend.
- Keep the Academy informed of any concerns or problems, which might affect my/our child's work or behaviour.
- Support the Academy's policies and guidelines for behaviour.
- Support my/our child in homework and other opportunities for home learning.
- Attend Parents' Evenings/meetings and discussions about my/our child's progress.
- When your child does not attend school you are responsible for their wellbeing and safety.

Signature(s):

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Date:

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