SCHOOL SWIMMING – PUPIL INFORMATION FORM 25/26

THIS IS A CONFIDENTIAL FORM WHICH IS THE RESPONSIBILITY OF THE SCHOOL. – CONFIDENTIAL INFORMATION NOT TO BE SHARED.

Name of Pupil:	

As part of your child's education, he/she/they will be attending swimming lessons this year. It is important that the swimming instructor is aware of the following details below.

	Yes	No
Does your child suffer from any medical condition which may affect their safety whilst swimming, e.g. ▪ Asthma (please bring inhaler to every swimming session), ▪ Epilepsy ▪ Sensory impairment e.g., deaf ▪ Visual impairment/colour blindness ▪ Grommets (wearing a swimming cap & ear plugs is recommended) ▪ Diabetes, ▪ Other **If 'Yes', please give details:**		
Does your child take medication on a regular basis? Is this required during your child's swimming lesson? **If 'Yes', please give details:**		
Please share if your child has SEND (Special Education Needs and Disabilities). For example, Autism, ADHD, cerebral palsy, cystic fibrosis. **Please give details (if applicable):**		

Please circle yes or no for the below statements.

Chemicals in the water in swimming pools affect my child's eyes. I give my permission for my child to wear goggles during swimming lessons and will ensure that they know how to use them safely.	Y/N
I am aware that my child will not be allowed to wear goggles for specific water or diving activities for safety reasons. (Prescription goggles for children with visual impairments are exempt).	Y/N
I am aware that all jewellery is to be removed prior to swimming activities. If a pupil does have earrings in that cannot be removed, they must wear a swimming cap which can be pulled over their ears.	Y/N

Swimming Ability: Please √ the criteria that matches best your child's ability in a swimming pool. These are some examples please pick the best fit (Not all in the criteria box may apply specifically to your child).

Non-swimmer: • May not want to enter the water. • May not have been swimming before either with an adult or as part of a structured lesson. • May have little experience in a swimming pool. • May be nervous in a pool (un-easy about touching the floor. Unable/uncomfortable in moving with 2 feet on the floor.)	
Beginner: • Some experience of being in a swimming pool. • Some confidence or confident moving with 2 feet on the floor. • May be able to kick legs with an aid (woggle, floats or armbands). For a distance of around 2m-5m. • Some confidence/confident resting chin on water, blowing bubbles or putting face in the water. • May be able to float with aids (e.g a woggle or armbands) or without on front or back.	
Intermediate (Improver): • May be able to swim a short distance using arms and legs on front and/or back unassisted (for example, 10m). • May be able to swim with face in – able to breathe without putting feet down. • May be able to jump into shoulder height water and swim back to a pool wall. • May be able to float confidently in the water unassisted.	
Advanced: • May be able to swim for a longer distance (for example, 25m +) using multiple strokes (e.g.: front crawl, backstroke, and breaststroke). • May be confident in deep water and able to jump into deep water swim a distance and return to the wall safely. • May understand more complex strokes (breaststroke and butterfly). • May have attended/be currently attending a swimming club and is used to swimming continuous lengths of a pool in deep water.	

I consent/do not consent for my child to participate in school swimming lessons.

Signature of Parent/Guardian ……..……..

Date …….

Example accompanying letter:

Dear Parent/Guardian

Your child will be attending school swimming lessons in the ……. term / s.

They will be attending on …… (day)for …….weeks.

We would appreciate it you could complete the enclosed 'School Swimming – Pupil Information Form' and return it to school by …… (date)

Please be aware of the following rules:

Swimwear must be safe, comfortable, and appropriate.

Bikinis, and long baggy shorts are not recommended for school swimming.

For specific medical, cultural, or religious reasons, pupils are permitted to wear clothing other than usual swimwear, it is recommended that leotard and tights or a full body suit be worn. In addition, pupils should be restricted to shallow water until they have shown that they are able to swim competently and safely.

Goggles should only be permitted when chemicals in the water may affect eyes. Goggles should be made of unbreakable plastic or rubber materials and children taught to use them correctly and safely prior to their attendance at the pool. Masks/ googles that cover the nose or whole face may not be worn for school swimming. Pupils who wish to wear goggles must have a permission slip signed by their parent/guardian/carer (included on the Information Form) and be able to use without adult assistance.

Hair must be tied back if long or of a length which might impair vision. It is highly recommended that children wear swimming hats. For facilities that share the pool with members of the public, it is very strongly recommended that children wear swimming hats, to ensure that pupils are easily identified.

Jewellery/watches must be removed prior to the swimming lesson (plasters covering newly pierced parts of the body will not be allowed due to plasters in the water becoming a choking hazard). It is strongly advisable that any pupils that wish to have body piercing do so at the beginning of the school summer holidays. *Please ensure that you quote what is in your School Policy. If a pupil is wearing earrings which cannot be taken out, they must then wear a swimming cap pulled over their ears to cover the earrings.*

Safety medic-alert bracelets or necklaces should be removed and given to the Adult in Charge for safe keeping during the swimming lesson and returned to the pupil after the session. If the bracelet is unable to be removed, it may be taped over securely with waterproof tape / sweat band.

(The school can add/amend any other aspects in line with their policy/risk assessment.)