

Leadgate Primary School

Pupil Details 2016/2017

First name	Middle name/s	Preferred Surname	Legal surname

Male **Female** (Please circle)

Date of birth _____

<p>Current address The School Office must be notified immediately to any changes to this information.</p> <p><i>Postcode:</i></p>	<p style="text-align: center;">Family circumstances – Please list who lives in the family home Names and Relationship to Child</p>
<p>Contact Telephone Numbers for Parents/Carers Please give your full name.</p> <p><i>Name:</i></p> <p><i>Home Number:</i></p> <p><i>Work Number:</i></p> <p><i>Mobile:</i></p> <p><i>Email:</i></p>	<p>Contact Telephone Numbers for Parents/Carers Please give your full name.</p> <p><i>Name:</i></p> <p><i>Home Number:</i></p> <p><i>Work Number:</i></p> <p><i>Mobile:</i></p> <p><i>Email:</i></p>

Parental Responsibility (Please see attached front sheet for definitions)

Please give details of who has parental responsibility for your child	Relationship to child
<i>NAME:</i>	
<i>NAME:</i>	

Other Emergency Contact Numbers

Please fill in details of who you give permission to collect your child from school at the end of the day or in an emergency. If there is any change to this you must inform us before home time on the day as we cannot allow a child to go with an unauthorised person. The authorised people must be over 16 years of age. If your child is unwell we will call the Parents/ Carers first. However we need other contacts as it can be distressing for the children if we cannot contact someone during the school day.

Name of person authorised to collect your child from school	Relationship to child	Contact Telephone Number

Doctors Name/Surgery Address	
Phone Number	
Does your child receive specialist help (eg Child & Family Unit) Please give details	

Previous schools attended	When?

Brothers & Sisters

Name	Male/female	Date of birth	School

Medical information

Does your child suffer from any of the following health conditions? (Please tick)

Asthma	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Speech Difficulty	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Eczema	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Hearing Difficulty	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Epilepsy	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Wears Glasses	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Diabetes	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Regular Hospital Treatment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fainting/Blackouts	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Other.....		
Food Allergy(eg nuts)	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

Would any of these affect your child's ability to take part in any school activity? Yes No (Please tick)
Are there any other details that would be helpful to us?

Additional information You are not obliged to answer the following questions on ethnic origin, but your cooperation is appreciated. Groupings are from the Government's annual statistical survey. Please tick. (See attached notes on Pg2)

Ethnic background	Religion (if any)
British [] Irish [] Roma/Gypsy [] Any other White background []	Christian [] Hindu []
Pakistani [] Bangladeshi [] Any other Asian background []	Jewish [] Muslim [] Sikh []
Caribbean [] African [] Any other Black background []	Other religion [] Jehovah's Witness []
Chinese [] Any other Ethnic background []	No Religion []
I do not wish an ethnic background category to be recorded []	

What language is spoken at home?

How does your child travel to school? (Please Tick) Walk Bus Car Taxi

What are your child's meal arrangements? (Please Tick) Paid Meal Free Meal Packed Lunch Home

Does a parent/carer serve in the Armed Forces? Yes No

EDUCATION SAFEGUARDING TEAM NOTES OF GUIDANCE FOR COMPLETION OF ADMISSIONS FORM

PARENTAL RESPONSIBILITY:

- All natural mothers, except where the child is subsequently adopted
- All natural fathers married to the child's mother at the time of birth, or subsequently
- Natural fathers who are not married to the child's mother may obtain parent responsibility by:
 - Court order
 - Formal agreement lodged at court
 - Residence order
 - Named on the child's birth certificate if the child was born after the 1st December 2003
- Adopted parents
- Guardians appointed by will or agreement
- All persons holding a residence order
 - Where there is a Placement Order in force the Adoption Agency share parental responsibility with the birth mother/father and the prospective adoptors once the child is placed with them but the Adoption Agency decides how the parental responsibility is exercised.
 - Special Guardianship Order where the birth parents parental responsibility is suspended except in relation to agreeing to an adoption order.
 - The Local Authority share parental responsibility when a Care Order (including an Interim Care Order) is in place. Foster carers do not have parental responsibility.

There is a presumption of paternity when a couple are married but this can be rebutted, for example through DNA testing.

CARERS

A person who does not have parental responsibility but who cares for the child for part of the day, i.e. grandparent, childminder etc.

TO WHICH ETHNIC GROUP DO YOU CONSIDER YOU BELONG?

*Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language culture, ancestry or family history. **Ethnic background is not the same as nationality or country of birth.***

The Information Commissioner (formerly the Data Protection Registrar) recommends that young people aged over 11 years old have the opportunity to decide their own ethnic identity. Parents or those with parental responsibility are asked to support or advise those children aged over 11 in making this decision, wherever necessary. Pupils aged 16 or over can make this decision for themselves.

Please study the list and select one only to indicate the ethnic background of the pupil or child named on the Admission/Contact form.

- | | | | | |
|-------------------------------|---|---------------------------------------|------------------------------|-----------------------------|
| White | -British
-Gypsy/Roma | -Irish
-Any other White background | -Traveller of Irish Heritage | |
| Mixed | -White and Black Caribbean
-Any other mixed background | | -White and Black African | -White and Asian |
| Asian or Asian British | -Indian | -Pakistani | -Bangladeshi | -Any other Asian background |
| Black or Black British | -Caribbean | -African | | -Any other Black background |

Chinese

Any other ethnic background

I do not wish an ethnic background category to be recorded

(Taken from the Guidance for Local Education Authorities on schools' collection and recording of data on pupils' ethnic background in compliance with the Data Protection Act and the 2001 national population Census)