

St Veronica's RC Primary - Pupil Data Collection Form



PUPIL PERSONAL INFORMATION

LEGAL SURNAME:		PREFERRED SURNAME	
LEGAL FORENAME		PREFERRED FORENAME:	
MIDDLE NAME(S)		COUNTRY OF BIRTH:	
GENDER:	Male / Female	DATE OF BIRTH:	____ / ____ / ____
HOME ADDRESS:			
POST CODE:		TELEPHONE:	

MOTHER/CARER INFORMATION

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS:					
POST CODE:					
PHONE: Daytime Mobile Home Work	1.				
	2.				
	3.				
	4.				
EMAIL ADDRESS				CONTACT PRIORITY	
RELATIONSHIP TO CHILD				LEGAL PARENTAL RESPONSIBILITY	YES/NO
PLACE OF WORK				COURT ORDER	YES/NO

FATHER/CARER INFORMATION

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS:					
POST CODE:					
PHONE: Daytime Mobile Home Work	1.				
	2.				
	3.				
	4.				
EMAIL ADDRESS				CONTACT PRIORITY	
RELATIONSHIP TO CHILD				LEGAL PARENTAL RESPONSIBILITY	YES/NO
PLACE OF WORK				COURT ORDER	YES/NO

OTHER CONTACT INFORMATION – Attach an extra sheet if necessary

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS:					
POST CODE:					
PHONE: Daytime Mobile Home Work	1.				
	2.				
	3.				
	4.				
RELATIONSHIP TO CHILD		LEGAL PARENTAL RESPONSIBILITY	YES/NO		
CONTACT PRIORITY					

TITLE:		FORENAME:		SURNAME:	
HOME ADDRESS:					
POST CODE:					
PHONE: Daytime Mobile Home Work	1.				
	2.				
	3.				
	4.				
RELATIONSHIP TO CHILD		LEGAL PARENTAL RESPONSIBILITY	YES/NO		
CONTACT PRIORITY					

PLEASE PROVIDE THE NAMES AND DATES OF BIRTH OF ANY SIBLINGS IN THE FAMILY

NAME	DATE OF BIRTH

PUPIL PREMIUM- ADDITIONAL INFORMATION

My child is a looked after child (LAC)	YES/NO
My child is adopted.	YES/NO
My child is subject to Special Guardianship	YES/NO
My child has a Social Worker. If YES, please provide details.	YES/NO
My child has a Family Support Worker. If YES, please provide details.	YES/NO

Any other information school need to know about Agency involvement.

PUPIL – MEDICAL INFORMATION

Does your child have a medical condition that we need to be aware of? (eg. Epilepsy, diabetes, asthma etc). If YES, what is the condition?	YES/NO
Does your child have any allergies? If YES, what is the allergy?	YES/NO
Does your child take regular medication, which will need to be administered by staff or self-administered?	YES/NO
Do you consider your child to have a disability? If YES, what is the nature of the disability?	YES/NO
Contact details and names of any Health Care Professionals involved in your child's care needs.	
Is there anything else that school need to be aware about regarding your child's medical needs?	

SPECIAL EDUCATIONAL NEEDS

Does your child have an EHCP plan?	YES/NO
Has pre-school provision identified any additional educational needs for your child. If YES, what are these needs?	YES/NO
Have other professionals been involved in your child's pre-school education provision? If YES, please provide details.	YES/NO
Is there a CAF open for your child?	YES/NO

PREVIOUS SCHOOL/NURSERY/CHILDCARE INFORMATION – IF APPLICABLE

Previous School/Nursery/Childcare			
From	/ /	To:	/ /

PLEASE CIRCLE FOLLOWING CHOICES AS APPROPRIATE

MODE OF TRAVEL

Bicycle Train Walks Car/Van Taxi Bus Car Share

MEAL TYPE

Universal Free Meal (Infants) Free meal (To be Applied for)* School Meal (Paid)

Sandwiches

Any special dietary requirements/allergies? (i.e. vegetarian, lactose intolerant etc etc)

***If you wish to enquire about Free School Meals grants please contact 01254 220711 and have your Date of Birth and National Insurance number available.**

ETHNICITY

White – British	White – Irish	Traveller of Irish Heritage	Gypsy/Roma	Any other White background
White and Black Caribbean	White and Black African	White and Asian	Any other mixed background	Indian
Pakistani	Bangladeshi	Any other Asian Background	Black-African	Black-Caribbean
Any other Black background	Chinese	Any other ethnic background	Refused	

RELIGION

Roman Catholic	Buddhist	Christian	Hindu	Islam
Jewish	Muslim	No Religion	Other	Methodist

Place and date of Baptism

HOME LANGUAGE

What language/languages are spoken in your home?

1) _____ 2) _____ 3) _____

FIRST LANGUAGE

Which language was first spoken to your child?

1) _____

Permission Consent – Please make sure you sign each box on this sheet as appropriate**Data Protection Regulations Notice**

The school adheres to the General Data Protection Regulations 2018 and this is outlined in the GDPR How we use pupil information policy which is available on the school website (or as a paper copy on request). The school stores, manages and uses data under the legal requirements set out by the DfE and Local Authority. Information is not shared beyond the scope of the agreed school policy.

By signing here you are saying you have understood the above statement and agree to the sharing of your information as outlined above.

Signed:

Date:

Internet access and use of media and equipment in school.

The school has a comprehensive web-filtering system in place but occasionally websites with suspicious content do get through. Pupils have access to computers, tablets and other media on a regular basis within lessons and we expect them to behave sensibly when using the Internet and school equipment and reserve the right to limit access should their online behavior elicit this need. No personal information is shared online through the school access to the internet and pupils are taught how to be safe online.

By signing here you are saying you have understood the above statement and to your child using school computers, tablets and other media including the Internet as outlined above.

Signed:

Date:

Photographs and use of image on social media and publication purposes.

We take photographs of the children at school. These pictures may be used in our school prospectus, in other printed publications that we produce, on our school website or newsletter, or on project display boards around school. Very occasionally they may be photographed by the media (eg at a high profile event or school celebration). Such images may appear in local and national papers, or on TV programmes. In order to comply with the General Data Protection Regulation 2019, we need your permission before we can photograph or make recordings of your child for promotional purposes.

By signing here you are saying you have understood the above statement and agree to the use of your child's images as outlined above.

Signed:

Date:

Please tick

Social Media

Website

Media

In school only

School Visits to local area

As a school we use our local area as much as possible to support and enhance the curriculum and therefore may take your child off-site for specific activities. You will be notified of these events and trips but will not always be asked for permission for your child to attend as they are within one mile of the school grounds. All activities are covered by the Lancashire County Council Public Liability Insurance and all trips and activities will have the correct staff:pupil ratio as prescribed by Lancashire County Council.

By signing here you are saying you have understood the above statement and agree to your child taking part in local activities as outlined above.

Signed:

Date:

Sampling of different foods in school

As part of the curriculum children may take part in food preparation and be allowed to taste and sample different foods. On occasions other children and staff may also bring in cakes or treats to share with their class linked to a celebration. Any food allergies will be strictly adhered to and monitored.

By signing here you are saying you have understood the above statement and agree for your child to be allowed to sample different foods in school.

Signed:

Date:

Sex and Relationships Education

The school has a duty to teach Sex and Relationships Education to all pupils as part of their learning about the Human Body. The curriculum is age specific and relates primarily to body parts, body changes and their effects on us and reproduction (covered in Year 5/6). At times the school nurse may be involved in the teaching of SRE. Parents are informed when reproduction is covered within the curriculum so that they can discuss any concerns they have regarding the coverage of the topic with the Class Teacher.

By signing here you are saying you have understood the above statement.

Signed:

Date:

This information was provided by:

Please print

Relationship to pupil:

Please print

PARENT- SUPPORT?

Please provide us with any information relating to a disability which may affect your mobility or communication within our school.

NOMINATED INDIVIDUALS AUTHORISED TO COLLECT YOUR CHILD

It is a statutory requirement for the school to hold the names of individuals authorised to collect your child from school.

Please complete the form attached to supply this information.

THIS INFORMATION WAS PROVIDED BY: _____
(please print)

RELATIONSHIP TO THE CHILD: _____

Signature _____ **Date** _____

NOMINATED INDIVIDUALS AUTHORISED TO COLLECT YOUR CHILD

CHILDS NAME: _____

Please provide on the list below the full names of all individuals authorised to collect your child including parents and carers.

Relationship to the child

1		
2		
3		
4		
5		
6		

This is a statutory requirement for all children; your child will only be released to one of the above nominated individuals.

YEAR 6 – ONLY

My child _____ will not be collected from school by an adult. I give permission for my child to be dismissed from school at 15:15.

Should any of the above arrangements change I will contact school to update.

Signed _____ Parent/Carer

Date _____