

Community Primary School

School is required to hold certain information regarding pupils on a computerised system. To ensure that we have up to date information, please could you spare a few minutes to fill in the following details about your child. We also ask parents to notify school if any given details change in the future. Please complete ALL sections.

GENERAL INFORMATION – CHILD						
(PLEASE PRINT AS SHOWN (ON YOUR C					
Legal Surname:			egal First Name:			
Middle Name(s):			Preferred Name:			
Date of Birth:			Gender (male/female)			
Main Address:						
Postcode:		1	Home Telephone:			
		the child with legal responsibility)				
(Birth parents usually have le	egal respons	sibility and this can only be remove Parent/Guar		erson by a Court Order)		
	Please fill	in the contact details you want		vith you		
Title: (Mr/Miss/Mrs etc.)		Full Legal Name:				
Home Address & Postco (if not the same as the child' address)						
Home Telephone:		Mo	bile Telephone:			
Work Telephone:		Em	ail Address:			
Relationship to Child:		pa	e you the custodial rent? (Joint custody 2 nd dress)			
	Diana fill	Parent/Guar		utah		
Title: (Mr/Miss/Mrs etc.)	Please fill in the contact details you want us to use to communicate with you Title: (Mr/Miss/Mrs etc.) Full Legal Name:					
Home Address & Postco		1 un 10gui 11uino.				
address)		2.5	shile Telemberre			
Home Telephone:			bile Telephone:			
Work Telephone:			ail Address:			
Relationship to Child:		ра	e you the custodial rent? (Joint custody 2 nd dress)			

SPECIAL CIRCUMSTANCES

Please detail below if there are any special circumstances (e.g. separated parents, rights of access, separated parents each requiring a report etc..)

"A school in the heart of the community"

Headteacher: Mrs L Cotton













EMERGENCY CONTACTS (Relatives or friends who can be contacted when we are unable to contact named Parents/Carers)								
-					·	1		
Contact 1:	le	Full Legal Nam	ie	Rela	tionship to Child	Telephone Num	ber	
Contact 2:								
Contact 3:								
DETAILS OF BRO	OTHER	S/SISTERS ATT	ENDING PRIM	IARY OR SEC	ONDARY SCHOOL			
NAME			Class	Name of so	hool if not Norden P	rimary		
		D	IETARY & SCH	IOOL MEAL	NFORMATION			
What meal will o	ur chil	d be having at s	chool?					
School Meal			Free Sch	ool Meal		Packed Lunch		
_						our allergy, Gluten free, H	lalal, kos	her
foods only, No diary	y produ	ce, No nuts of any t	type, No pork, Se	afood allergy, v	egetarian)			
			MEDIC	AL INFORM	ATION			
Doctor's Name:	_							
Surgery:								
Address:					Telephone No:			
Does your child l	have a	diagnosed medi	ical condition v	which school	need to be aware of	? Please provide deta	ails bel	ow.
Does your child have a diagnosed medical condition which school need to be aware of? Please provide details below.								
Does your child t	take ar	ny regular medic	ation? Please	orovide deta	ls below.			
	_		rmission to ad	minister any	required treatment	to your child in an	YES	NO
emergency situated Can your child be			n an omorgone	v2 (Planca dale	+0)		YES	NO
Can your ciliu b	e takei	Tout of school in	ii ali eillergelic	y: (Flease dele	te)		ILS	NO
			SPECIAL	EDUCATION	I NEEDS			
Does your child have any special educational needs that the school needs to be aware of? If so please can you supply details below:								
details below.								
Have you or you	r child	any impairment	t or disability w	vhich may pr	event access to the b	ouilding or access to	inform	ation
provided by the school? If so, please can you supply details below:								

Ethnic Origin - Please study the lis	ts below and tick one box only to	indicate ethnic bad	ckground of the pupil or child named abov	re.	
WHITE	MIXED		ASIAN OR ASIAN BRITISH		
British	White & Black Car		Indian		
Irish	White & Black Afr	ican	Pakistani		
Traveller of Irish Heritage	White & Asian		Bangladeshi		
Gypsy/Roma	Any other mixed I	oackground	Any other Asian background		
Any other white background					
DI ACK OD DI ACK DDITICII	OTHER				
BLACK OR BLACK BRITISH	OTHER		DI C.		
Caribbean	Any other ethnic I	background	Please State:		
African					
Any other black background					
Languages spoken at home:					
Languages spoken at nome.	_				
Mother tongue/first languag	e: (The language your child was fi	rst exposed to at h	ome)		
ouici toiligue, illot lailiguag	Ciric language your crima was in	ist exposed to de ii			
English as an additional lange	uage? Please circle YES N	0			
RELIGIOUS AFFILIATION (Ple	ease select from the options below	<u> </u>			
Christian	Sikh		No Religion		
Buddhist	Jewish		Other		
Hindu	Muslim				
NATIONAL IDENTITY (Please	select from the options below)	_			
Welsh	Scottish		British		
English	Irish		Other		
Any					
Child's Country of Birth:					
Child's Nationality:					
MODE OF TRANSPORT HOW	و منال برمرية و ما اماناه و برمرية الناس	to cohoo!2 (Disse		a	
Car/Van	Walking	to schools (Pleas	e select one, most used mode of transport Taxi)	
Car Share	Bicycle		Public Transport (i.e. Bus)		
Cai Silare	Bicycle		Fublic Transport (i.e. bus)		
SERVICE CHILDREN Is either	parent a member of the Armed Fo	rces? If so please o	give details including Personnel Category.		
	<u> </u>	p 5	,		
ADOPTED/IN CARE/LOOKEI	N AETER CHILDREN (Has your	child been adopte	ed or ever in care?)	NO	
ADOPTED/IN CARE/LOOKE	DAFIER CHILDREN (Has your	child been adopte	d or ever in care?)	NO	
PREVIOUS NURSERY/SCHOOL DETAILS					
NURSERY/PLAYGROUP/SCHOOL ATTENDED					
ADDRESS & POSTCODE					
ADDRESS & FOSTCODE					
ATTENDED FROM (DATE)		TO (DATE)			
PREVIOUS HOME ADDRESS		IO (DAIL)			
LVENIOOS HOIME ADDKE22					

(If different from above)

ETHNIC & RELIGIOUS DETAILS

	PARENTAL CONSENT			
Does the school have your parental consent for the following:				
1.	Does your child have parental consent for the school to take a photograph of your child to use on the school website/learning platform?	YES	NO	
2.	Does your child have parental consent for the school to take videos of your child to use on the school website/learning platform?	YES	NO	
3.	Does your child have parental consent for the school to take videos or photographs of your child to use on the school Facebook page?	YES	NO	
4.	Does your child have parental consent for the school/external agencies (Photographer, local newspaper) to take photographs of your child?	YES	NO	
5.	Does your child have consent for parents and family members to photograph or video productions in which their children take part?	YES	NO	
6.	My child has access to the internet at home (Learning Platform)	YES	NO	
7.	Does your child have parental consent to partake in any local school visits? (Letters regarding all organised school visits/trips will be sent out when required along with additional parental consent and contact information forms)	YES	NO	

I undertake to notify the School in writing if any significant information changes, particularly my child's home address and/or contact numbers. I declare that all the information which I have provided is true

DATA PROTECTION ACT

Your privacy is important to us, and we want to communicate with our Staff, Governors, Parents and our Children in a way which has their consent, and which is in line with UK law on data protection. As a result of a change in UK law May 2018, we now need your consent to how we communicate with you.

By signing this form you are confirming that you are consenting to Norden Community Primary School holding and processing your personal data for the following purposes (please tick the boxes where you grant consent):-

I consent to Norden Community Primary School contacting me by □ post □ phone □text or □email.

- □ To keep me informed about news, events, activities and services at Norden Community Primary School
- □ To share my contact details with the DFE Local Authority so they can keep me informed about news, events, activities that will be occurring in the school and which are directly relevant to the role I am undertaking.

Parent/Carer Signature:	
Parent/Carer Print Name:	
Date:	

You can grant consent to all the purposes; one of the purposes or none of the purposes. Where you do not grant consent we will not be able to use your personal data; (so for example we may not be able to let you know about any forthcoming events); except in certain limited situations, such as where required to do so by law or to protect members of the public from serious harm **or in an emergency**. You can find out more about how we use your data from our "Privacy Notice" which is available from our website.

You can withdraw or change your consent at any time by contacting the Administrator at school. Please note that all processing of your personal data will cease once you have withdrawn consent, other than where this is required by law, but this will not affect any personal data that has already been processed prior to this point.

Office Use Only					
PROOF OF RESIDENCY CHECKED:		YEAR GROUP:			
BIRTH CERTIFICATE CHECKED:		CLASS:			
DATE ADMITTED TO SCHOOL:		PROCESSED BY & DATE:			