**Bottisham Community Primary School**

 **SCHOOL ADMISSION FORM**

The [General Data Protection Regulation (GDPR)](http://data.consilium.europa.eu/doc/document/ST-5419-2016-INIT/en/pdf), provisions of the Data Protection Act 2018 (DPA 2018) and the Education (School Records) Regulations (1989) protect this strictly confidential information, stored on the school’s student records database. The information on ethnic origin and first language is needed by the school and by Cambridgeshire County Council (the Children’s Services Authority). This is to ensure that resources are made available when required and that the Education Service offers real equality of opportunity for all pupils.

The sections marked \* are non-compulsory. If supplied, this information will be shared with Education Welfare Benefit Service, Cambridgeshire County Council, and other relevant bodies administering public funds, who collect and use information about you so that we can provide your child(ren) with entitlement to education benefits under The Education Act 1996.

By signing this form, I confirm I understand that data will be shared as appropriate to enable: determination of the support available; verification of any entitlement to Free School Meals/Pupil Premium; prevention and detection of fraud in connection with any claims; periodic checks by the Education Welfare Benefit Service to confirm entitlement to education benefits.

Full details about how we use this data and the rights you have around this can be found in our Data Policy on our website, <https://bottishamprimary.org/> where you will also find our Privacy Notices. If you have any data protection queries, please contact our Data Protection Officer whose contact details are on our Privacy Notice.

**INFORMATION ABOUT YOUR CHILD**

|  |  |
| --- | --- |
| Legal Surname: |  |
| Legal Forename: |  |
| Middle Name(s): |  |
| Preferred Forename: |  |
| Date of Birth: |  | Gender:(Male/Female/Other |  |
| Home Address: | House name/number: |  |
| Street/ Road: |  |
| Village: |  |
| Town: |  |
| County: |  |
| Postcode: |  |
| Home Telephone Number: |  |  |

|  |  |
| --- | --- |
| Name of previous setting/school: |  |
| Address and telephone number of previous setting/school |  |

**SERVICE CHILDREN IN SCHOOL**

Schools are now required to indicate whether a child has a parent(s) / guardian(s) currently serving in regular military units of any of the armed forces, and designated as Personnel Category 1 or 2. Please could you indicate if your child is a 'service child in education' by ticking one of the boxes below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No |  | Yes |  | I do not wish a service children indicator to be recorded |  |

**MEDICAL/SPECIAL NEEDS DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Doctor/Surgery: |  | Telephone: |  |
| Address: |  |
| Please give details of any medical conditions which the school needs to be aware of (e.g asthma, epilepsy, allergies, etc.): |  |
| Please give details if your child has a medically diagnosed food allergy or intolerance: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Does your child have any Special Needs Provision? | Yes | No | If yes, SEN Support or EHC Plan? |  |
| If yes, please provide brief details: |  |

**CONTACT INFORMATION**

Please provide details of **three** parents/guardians/contacts below and place them in the order you wish them to be contacted in an emergency.

Please tell us if the information changes; we need to be able to contact you quickly if your child is ill.

Each person MUST:

* Give permission for you to provide the school with their name and contact information
* Sign and say that they;
	+ Know that the school has their name and contact information which will be stored in accordance with the school GDPR policy and practice
	+ Understand that the school may use the information to contact them in case of emergency relating to their child.
	+ Understand that the can request for the school to remove their information from their records at an point.

**PRIORITY 1 CONTACT**

|  |  |
| --- | --- |
| Title: |  |
| Forename: |  | Surname: |  |
| Relationship to child: |  | Parental Responsibility: | Yes | No |
| Date of Birth: |  | NI Number: |  |
| Home Address: |  |
| Postcode: |  |
| Home Phone Number: |  | Mobile Phone Number: |  |  |
| Personal email: |  |
| Work Address: |  |
| Work telephone number: |  |
| Signed (giving permission for this information to be provided to the school) | Signed: | Date: |  |

**PRIORITY 2 CONTACT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title: |  |  |  |  |
| Forename: |  | Surname: |  |
| Relationship to child: |  | Parental Responsibility: | Yes | No |
| Date of Birth: |  | NI Number: |  |
| Home Address: |  |
| Postcode: |  |
| Home Phone Number: |  | Mobile Phone Number: |  |  |
| Personal email: |  |
| Work Address: |  |
| Work telephone number: |  |
| Signed (giving permission for this information to be provided to the school) | Signed: | Date: |  |

**PRIORITY 3 CONTACT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title: |  |  |  |  |
| Forename: |  | Surname: |  |
| Relationship to child: |  | Parental Responsibility: | Yes | No |
| Date of Birth: |  | NI Number: |  |
| Home Address: |  |
| Postcode: |  |
| Home Phone Number: |  | Mobile Phone Number: |  |  |
| Personal email: |  |
| Work Address: |  |
| Work telephone number: |  |
| Signed (giving permission for this information to be provided to the school) | Signed: | Date: |  |

**SEPARATED PARENT INFORMATION-For parents not living with student**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title: |  |  |  |  |
| Forename: |  | Surname |  |
| Relationship to child: |  | Parental Responsibility: | Yes | No |
| Date of birth: |  | NI Number |  |  |
| Home Address |  |  |  |  |
| Postcode: |  |  |  |  |
| Home Phone Number |  | Mobile Phone Number: |  |  |
| Personal email: |  |
| Work Address: |  |
| Work telephone number: |  |
| Is there a court order in place relating to separated parents? | Yes | No | If yes, are there any terms in the order which the school needs to be aware of |  |

|  |  |  |
| --- | --- | --- |
| Signed (giving permission for this information to be provided to the school | Signed | Date |
| If you are unable to get a signature from this parent, please state whether you have discussed it with them and gained verbal permission | Yes-verbal permission obtained | No- verbal permission not obtained | If no, please state reasons: |

**PERSONAL INFORMATION**

To help us and the local authority in monitoring equal opportunities you are asked to complete the following:

|  |  |  |  |
| --- | --- | --- | --- |
| Child’s country of birth: |  | Child nationality: |  |
| Family’s ethnic Origin. (Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, culture, ancestry or family history. Ethnic background is not the same as nationality or country of birth):

|  |  |
| --- | --- |
| Any other Asian background (this includes Aftrican, Asian, Nepali, Sinhalese, Sri Lankan Tamil….) |  |
| Black or Black British- Caribbean |  |
| Black or Black British- African |  |
| Any other Black Background |  |
| Chinese |  |
| Any other Ethnic group- please circle one.(This includes Afghan, Arab, Egyptian, Filipino, Iranian, Iraqi, Japanese, Korean, Kurdish, Latin American, Labanese, Libyan, Malay, Mauritian, Moroccan, Polynesian, Thai, Vietnamese, Yemeni..) |  |
| I do not wish an ethnic background to be recorded |  |

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

 |
| First Language |  | Additional Language |  |
| Date of arrival in UK (if relevant): |  |
| Child’s religion: |  |
| If there are any religious or cultural practices of which the school should be aware, please specify. |  |

|  |
| --- |
| Please give the name, gender and date of birth of any other children in your family. |
| Name: |  | Date of Birth: |  | Male/Female |
| Name: |  | Date of Birth: |  | Male/Female |
| Name: |  | Date of Birth: |  | Male/Female |
| Name: |  | Date of Birth: |  | Male/Female |

**TRAVEL ARRANGEMENTS**

Please let us know how your child will be travelling to school. Where he/she uses more than one mode of travel for each journey to school, you should tell us the most frequently used and/or the longest element of the journey by distance

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| School Bus |  | Public Transport Bus |  | Bicycle |  | Walking |  |
| Taxi |  | Car/Van |  | Car Share |  | Other |  |

**COLLECTING YOUR CHILD FROM SCHOOL**

We operate a strict policy about NOT letting your child go home with anyone apart from you unless we have your permission.

Who will be collecting your school? Please list in order of possible frequency, including yourself if you are collecting. This list if your permission for these people to collect your child. If your child is collected by someone else (e.g. going home with another parent as part of a play date arrangement we request that parents inform us by email before collection time including a password to be used by the person collecting your child. We will also request to see ID on collection.

|  |  |  |
| --- | --- | --- |
| Name | Relationship to child e.g. parent, grandparent, known carer etc | Contact telephone number |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**PERMISSION FOR VISITS DURING THE SCHOOL DAY**

We sometimes use the village and the surrounding areas for lessons. This will always ben with the direct supervision of an adult.

Please sign here to give your permission for your child to be taken in supervised groups to local nearby venues for this purpose

|  |  |  |
| --- | --- | --- |
| I give my permission | Signed: | Name: |
| I do not give my permission | Signed: | Name: |

**USE of IMAGES PERMISSION**

We require parental consent to use pupil images external to the school site and therefore if you are willing to allow the school to use images of your son/daughter in publications in this controlled way. Should you wish to withdraw consent at any time then you may do this by contacting the school. We will then remove the image from any future publications, although the consent will still be valid for any publications already printed.

|  |  |
| --- | --- |
| I give permission for my child’s photograph to be used on the school website  | Y / N |
| I give permission for my child’s photograph to be used on Anglian Learning website  | Y / N |
| I give permission for my child’s photograph to be used on school or trust printed resources  | Y / N |
| I give permission for my child’s photograph to be used in internal displays  | Y / N |
| I give permission for my child’s photograph to be used in the media  | Y / N |
| I give permission for my child’s photograph to be used on social media  | Y / N |
| I give permission for my child’s photograph to be used for the purpose of staff recruitment  | Y / N |
| I give permission for my child’s photograph to be used for promoting the school or trust by third-party organisations |  |

|  |  |
| --- | --- |
| Signed: | Name: |

**DECLARATION**

|  |
| --- |
| I certify that, to the best of my knowledge, the information on this form is correct. |
| Signature: | Name: |
| Relationship to child: | Date: |

|  |
| --- |
| I certify that, to the best of my knowledge, the information on this form is correct. |
| Signature: | Name: |
| Relationship to child: | Date: |