



Data Collection Sheet

A. PUPIL INFORMATION

CHILDS LEGAL SURNAME		CHILDS LEGAL FORENAME AND MIDDLE NAME	
PREFERRED FIRST NAME (If different from above)			
DATE OF BIRTH		GENDER	
HOME ADDRESS (Including Post Code)			
HOME TELEPHONE NO.		WITH WHOM DOES CHILD LIVE? (Father, Mother, Both etc.)	
FAMILY LANGUAGE		RELIGION	

B. PARENT INFORMATION

Please give details of all persons who have parental responsibility. Please put in order you wish to be contacted in an emergency. If applicable, please indicate by * the custodial parent. We require by law to request this information. Details of Court Orders in respect of the child should be sent in a separate letter.

1. FULL NAME		RELATIONSHIP TO CHILD	
HOME ADDRESS (If different from child)		DAYTIME WORK ADDRESS	
DAYTIME TELEPHONE NO.		MOBILE TELEPHONE NO.	
EMAIL ADDRESS			
2. FULL NAME		RELATIONSHIP TO CHILD	
HOME ADDRESS (If different from child)		DAYTIME WORK ADDRESS	
DAYTIME TELEPHONE NO.		MOBILE TELEPHONE NO.	
EMAIL ADDRESS			

Reports will be sent home with your child. If you would like reports to be sent to an additional address/email address please provide the address here.

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C. OTHER LOCAL EMERGENCY CONTACT INFORMATION

Please give another daytime contact in case of emergencies.

3. FULL NAME		RELATIONSHIP TO CHILD	
HOME ADDRESS (If different from child)		DAYTIME WORK ADDRESS	
DAYTIME TELEPHONE NO.		MOBILE TELEPHONE NO.	

Office Use Only

EYFS Y1 Y2 Y3 Y4 Y5 Y6 Date

Received.....

D. GP / SURGERY CONTACT INFORMATION			
GP NAME			
GP / SURGERY ADDRESS (Including Post Code)		TELEPHONE NO.	

E. SIBLINGS INFORMATION			
SIBLINGS (At Anns Grove Primary)		CLASS	
SIBLINGS (At Anns Grove Primary)		CLASS	
SIBLINGS (At Anns Grove Primary)		CLASS	

F. ETHNICITY									
We require information of your child's ethnic origin, not his/her nationality. For example, the ethnic origin of a child whose family comes from Somalia may be Somali – but this child may have British Citizenship or Nationality. People's ethnic origin is sometimes complex – but it often involves shared experiences with others from the same ethnic group, such as originating from the same place, or having the same religion and language. Please tick appropriate box.									
White British	<input type="checkbox"/>	White Irish	<input type="checkbox"/>	White Eastern European	<input type="checkbox"/>	White + any other Asian Background	<input type="checkbox"/>	Gypsy / Roma	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	White and Pakistani	<input type="checkbox"/>	Traveller of Irish Heritage	<input type="checkbox"/>	Yemeni	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Other Black African	<input type="checkbox"/>	Black Somali	<input type="checkbox"/>	Black Caribbean	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Any Other Black Background	<input type="checkbox"/>	Any other mixed Background	<input type="checkbox"/>	Any other Asian Background	<input type="checkbox"/>
Other Ethnic Group	<input type="checkbox"/>								

G. HEALTH / MEDICAL INFORMATION		
Information about your child's health and any other medication your child is on including allergies, asthma, epilepsy, diabetes, colour blind etc.		
HEALTH AND MEDICAL INFO. OR CONDITIONS		CARE PLAN (Please tick if your child currently has a care plan).

H. DIETARY NEEDS	
DIETARY NEEDS (Vegetarian, halal, food allergies etc.)	

Please save a copy of this form for your own records. If any of the details on this form change then please complete the relevant section and send to the school office.

I. DECLARATION			
Data Protection Act 1998: The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority and with the DCSF.			
PRINT			
SIGNATURE		Date:	

CHILDS NAME		CLASS	
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J. PARENTAL PERMISSION FOR LOCAL TRIPS / VISITS

From time to time we take the children on local visits, for example to Millennium Park, to Heeley City Farm, to the library or to religious buildings.

Our definition of 'local trip' in this sense would be one that

- is within easy walking distance
- takes place wholly within the school day (i.e. not running over past 3.25 p.m.)
- has no cost attached

For such visits we ensure at least two adults accompany the group and that careful supervision is provided. In order to take children with us we do need parental permission. However, it is time-consuming to continually send out permission slips and some of the visits are organised at very short notice.

It would be very helpful to us if you could complete and return the attached slip giving permission for your child to be included in these types of visits as they arise. If you have any concerns or queries do contact the office, or your child's teacher.

If you do not give permission then please do not sign.

If you do give permission for your child to participate in educational visits then please sign below.

PRINT NAME			
SIGNATURE		Date:	

K. PHOTOGRAPHS/VIDEO IMAGES IN SCHOOL AND ON SCHOOL WEBSITE

In line with 'Safeguarding Children in Education' regulations the school needs to have permission for children to be photographed/video images in school for any reason, particularly in the following circumstances:

1. Displays within school
2. School prospectus brochure
3. School website
4. Residential and/or school day trips
5. for publication in newspaper articles about the school

Could you please return the slip below A.S.A.P.

I'm sure you can appreciate the importance of these procedures to ensure every child's safety in school.

Thank you for your continued support.

If you do not give permission for your child's photo/video image to be used then please tick this box sign and return.

If you do give permission for your child's photo/video image to be used then please sign below.

I give permission for my child's photographic or video image to be made available by the school on either the school website, in printed publications or other media for educational purposes only.

PRINT NAME			
SIGNATURE		Date:	

L. Home Learning Access

Please can you indicate whether your child has access to a home computer or laptop to complete work at home through online learning i.e. Google Classroom.

- Yes, I have access to a home computer/laptop.
- No, I do not have access to a home computer/laptop.

ANNS GROVE PRIMARY SCHOOL

Please can you list the people below who are authorised to collect your child from school. Please be advised that these people need to be over 16 years old and must provide photo identification if staff have not met them before.

If we are not sure we will keep your child in school until you can be contacted.

Thank you for your continued support in keeping your child safe.

Child's Name:	
Parents Name & Contact No:	
Authorised Adult and Relationship to Child.	
Authorised Adult and Relationship to Child.	
Authorised Adult and Relationship to Child.	

My Child _____ has permission to make their own way home from school.

If I need to change these arrangements for any reason I agree to contact the school and let them know.

Signed _____ Parent/Carer

Parents Name _____ Contact No: _____