



GRENDON PRIMARY SCHOOL CONFIDENTIAL DATA FORM



Data Protection Act 1998 – This information is being collected to administer your child's progress through the education system. It may be shared with the Birmingham City Council Children's Services, the Department for Education, Connexions, relevant health and welfare practitioners, Church or faith Authorities and other schools or educational establishments with whom your child becomes associated.

Please fully complete all sections of this form

| | | | |
|--|--|---|---|
| Child's Details | | | |
| Legal Surname: | | Legal Forename: | |
| Other Legal names: | | Gender: | Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Name child is known as, if different from above: | | | |
| Date of Birth: | | Nationality: | |
| | | Country of Birth: | |
| Address: | | | |
| | | Postcode: | |
| Position in family i.e. first born etc. | | | |
| Previous school/nursery: | | Do we have permission to Contact – Yes / No | |

| | | | |
|---|---|---|--|
| Parent's Details <i>Please note your national insurance number and DOB are required to check your eligibility to claim free school meals. For every child that qualifies for free school meals school receives additional Pupil Premium funding.</i> | | | |
| Title Mr/Mrs/Ms etc | Forename(s) (as on legal documents) | Surname (as on legal documents) | Relationship to child (Mother/father/legal guardian) |
| | | | |
| Date of Birth: | | Contact numbers: | |
| National Insurance no. | | | |
| Title Mr/Mrs/Ms etc | Forename(s) (as on legal documents) | Surname (as on legal documents) | Relationship to child (Mother/father/legal guardian) |
| | | | |
| Date of Birth: | | Contact numbers: | |
| National Insurance No. | | | |
| Child lives with: | | | |
| Legal Parental responsibility : Mother <input type="checkbox"/> Father <input type="checkbox"/> Other <input type="checkbox"/> Please specify | | | |

| | | |
|--|------------|---|
| Emergency Contact Persons: Please provide | | <i>Relationship to child: Grandparent/Aunty/Uncle/Other Relative/Friend</i> |
| 1 | Name : | |
| | Address: | |
| | Post Code: | Contact numbers: |
| 2 | Name: | |
| | Address: | |
| | Post Code: | Contact numbers: |

Languages regularly spoken at home Religion.....

Stage of speaking English: early developing established

Status in country: Perm Temp Refugee Asylum seeker Traveller

Lunchtime Arrangements

Do you think your child is entitled to Free School Meals Yes
 No (We will need to see evidence of your claim)

Paid School Meals Yes Packed Lunch

Please note - All children in Reception -Year 2 are provided with a school lunch under the Universal Infant Free School Meal Scheme.

If you wish your child to be excluded from religious activities including visits to church; you must provide a reason below, if you fail to provide a reason, we will assume you have given permission for your child to take part.

Medical History

Known Allergies.....
.....

Does your child suffer from Asthma Yes / No

Does your child need to use an inhaler in school Yes / No

Inhalers – with parental agreement children are allowed to keep inhalers at school. The inhaler should be clearly marked with the child’s name and will be kept in class.

Other Medical Conditions (please provide details)
.....
.....
.....

In case of emergency I DO / DO NOT give my consent to such medical treatment, which in the opinion of a medical practitioner may be necessary for my child.

Occasionally I will need to contact parents if their child is ill at school. However, the problem could be urgent and on the rare occasion when a parent cannot be contacted the Head Teacher may need the opinion of a qualified medical practitioner. Completing all sections on the contact form will avoid any delay in getting the correct treatment for your child.

Doctors Name
.....

Surgery Address & Tel No.
.....
.....

Tel No.....

CONSENT FOR USE OF IMAGES IN PUBLICATIONS

During your child’s time at Grendon Primary School opportunities may arise for your child’s name, age, image and examples of their work to be displayed in a range of publications, such as our newsletter, website and on school noticeboards.

If you DO NOT wish your child’s image to be used please inform us in writing.

| OFFICE USE ONLY | | | |
|-------------------------|----------|----------------------------|----------|
| Proof of date of birth: | Seen by: | Proof of address: | Seen by: |
| Date admitted: | Class: | Previous school contacted: | Date: |