

STUDENT INFORMATION SHEET

STUDENT DETAILS

SURNAME: FORENAMES:

ANY PREVIOUS SURNAME: D.O.B.

GENDER: MALE [] FEMALE [] PRIMARY SCHOOL (PLEASE STATE):

ADDRESS:

POST CODE: HOME PHONE NUMBER:

PARENT/GUARDIAN DETAILS

PARENT/GUARDIAN 1:

TITLE: FORENAME: SURNAME:

RELATIONSHIP TO CHILD: PARENTAL RESPONSIBILITY: YES [] NO []

ADDRESS (IF DIFFERENT TO CHILD)

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HOME TEL MOBILE TEL WORK TEL

EMAIL ADDRESS:

PLEASE NOTE – EMAIL ADDRESSES WILL BE USED TO SEND OUT CORRESPONDENCE FROM SCHOOL SO PLEASE SUPPLY THIS IF YOU HAVE ONE

PARENT/GUARDIAN 2:

TITLE: FORENAME: SURNAME:

RELATIONSHIP TO CHILD: PARENTAL RESPONSIBILITY: YES [] NO []

ADDRESS (IF DIFFERENT TO CHILD)

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HOME TEL MOBILE TEL WORK TEL

EMAIL ADDRESS:

PLEASE NOTE – EMAIL ADDRESSES WILL BE USED TO SEND OUT CORRESPONDENCE FROM SCHOOL SO PLEASE SUPPLY THIS IF YOU HAVE ONE

ADDITIONAL CONTACTS

CONTACT 3:

TITLE: FORENAME: SURNAME:

RELATIONSHIP TO CHILD: PARENTAL RESPONSIBILITY: YES [] NO []

ADDRESS (IF DIFFERENT TO CHILD)

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HOME TEL MOBILE TEL WORK TEL

EMAIL ADDRESS:

CONTACT 4:

TITLE: FORENAME: SURNAME:

RELATIONSHIP TO CHILD: PARENTAL RESPONSIBILITY: YES [] NO []

ADDRESS (IF DIFFERENT TO CHILD)

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HOME TEL MOBILE TEL WORK TEL

EMAIL ADDRESS:

MEDICAL DETAILS

DOCTORS ADDRESS

NAME OF DOCTOR TEL NO

DETAILS OF ANY MEDICAL CONDITION THE SCHOOL SHOULD BE AWARE OF

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OTHER PERSONAL DETAILS

HOME POSTAL TITLE FOR ANY CORRESPONDENCE

OTHER PERSONS REQUIRING INFORMATION FROM SCHOOL

ETHNICITY & LANGUAGE

PLEASE SELECT ONE ETHNICITY BACKGROUND FROM THE FOLLOWING:-

- | | |
|--|--|
| <input type="checkbox"/> WHITE – BRITISH | <input type="checkbox"/> ASIAN OR BRITISH ASIAN – INDIAN |
| <input type="checkbox"/> WHITE – IRISH | <input type="checkbox"/> ASIAN OR BRITISH ASIAN – PAKISTANI |
| <input type="checkbox"/> WHITE – TRAVELLER OF IRISH HERITAGE | <input type="checkbox"/> ASIAN OR BRITISH ASIAN – BANGLADESHI |
| <input type="checkbox"/> WHITE – GYPSY/ROMA | <input type="checkbox"/> ASIAN OR BRITISH ASIAN – ANY OTHER ASIAN BACKGROUND |
| <input type="checkbox"/> WHITE – ANY OTHER WHITE BACKGROUND | |
| <input type="checkbox"/> MIXED – WHITE & BLACK CARIBBEAN | <input type="checkbox"/> BLACK OR BLACK BRITISH – CARIBBEAN |
| <input type="checkbox"/> MIXED – WHITE & BLACK AFRICAN | <input type="checkbox"/> BLACK OR BLACK BRITISH – AFRICAN |
| <input type="checkbox"/> MIXED – WHITE & ASIAN | <input type="checkbox"/> BLACK OR BLACK BRITISH – ANY OTHER BLACK BACKGROUND |
| <input type="checkbox"/> MIXED – ANY OTHER MIXED BACKGROUND | |
| <input type="checkbox"/> CHINESE | <input type="checkbox"/> ANY OTHER ETHNIC BACKGROUND |

FIRST LANGUAGE: ANY OTHER LANGUAGE:

COUNTRY OF BIRTH NATIONALITY

SPECIAL NEEDS INFORMATION

STATEMENTED []

SCHOOL SUPPORT []

MONITORING []

NO SEN []

PRESENT SUPPORT: LEARNING, EMOTIONAL, BEHAVIOUR

OTHER E.G. GIFTED AND TALENTED

OUTSIDE AGENCY INVOLVEMENT

SAFEGUARDING

ANY SAFEGUARDING CONCERNS

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OUTSIDE AGENCY INVOLVEMENT

OTHER INFORMATION

CURRENT FREE SCHOOL MEAL AWARD Yes / No - **PLEASE FILL IN FSM FORM**

IN CARE Yes/ No IF SO UNDER WHICH AUTHORITY

REFUGEE Yes/NO ASYLUM SEEKER Yes/NO TRAVELLER Yes/No

DECLARATION

I CERTIFY THAT THE INFORMATION GIVEN BY ME ON THIS FORM IS COMPLETE AND TRUE AND I UNDERSTAND THAT THE SCHOOL WILL TAKE SUCH STEPS AS THEY CONSIDER NECESSARY TO VERIFY THE SAME. THIS MAY MEAN CONTACTING YOUR PRESENT OR PREVIOUS SCHOOL. I NOTE THAT MISLEADING OR FRAUDULENT INFORMATION COULD RESULT IN THE WITHDRAWAL OF ANY OFFER OF A SCHOOL PLACE.

PARENT/GUARDIAN SIGNATURE

DATE

OFFICE USE ONLY

START DATE

UPN NO