

Children's Information Form



Child's Information

Forename: Surname:

Date of birth:/...../..... Male Female

Address:

Postcode:

Access information about the home address e.g. intercom system, communal door to access flats, housing office, management office

Free school meal number:

Parent/Carer Information

Mother/Carer Name:..... Father/Carer Name:

Relationship to pupil: Relationship to pupil:.....

Home phone no: Home phone no:

Mobile phone no: Mobile phone no:

Work phone no: Work phone no:

Medical conditions / Disabilities: Medical conditions / Disabilities:

If you would like to be contacted by email, please provide email address(es) below:

Parent/Carer email address(es):

In case of an emergency (illness or injury), it is essential that we are able to contact you or another suitable person quickly. Please give details below of the people that we can contact:

CONTACT 1 Name:

Relationship to pupil:

Home/Work phone no: Mobile phone no.....

CONTACT 2 Name:

Relationship to pupil:

Home/Work phone no: Mobile phone no.....

CONTACT 3 Name:

Relationship to pupil:

Home/Work phone no: Mobile phone no.....

Please inform the school immediately of changes to any contact details provided on this form

Are there any Legal rights of access concerning your child? If so, please specify.

.....
.....
.....

Please note; we collect this information to set up your child’s school profile and capture the information we need under education laws to add you to our roll. For more information see our Privacy Notice on <http://www.pinehurst-primary.co.uk/>

I consent to the sharing of information as per Pinehurst Primary School’s Privacy Notice

Signed: Parent/Carer Date:/...../.....

Medical information:

Family Doctor:

Dr’s Surgery Address:

Surgery phone no:.....

Has your child been diagnosed with any medical condition? E.g. Asthma, Diabetes, Epilepsy, Eczema, Psoriasis, Hay fever?

If the answer to any of these is ‘yes’ please give details below, or give details of any other condition

.....
.....
.....

Does your child have Hearing loss Allergic reactions to medicines/immunisation
or wear glasses

Dietary needs:

Does your child have any of the following dietary needs?

Artificial colouring allergy Gluten Free Halal Kosher foods only
No dairy No nuts No Pork Seafood allergy Vegetarian

Any other Allergic reactions to food

I give **consent** to do any emergency medical treatment my child may need during the school day including trips/school comp/swimming lessons.

Signed: Parent/Carer Date:/...../.....

Is there any reason why your child cannot attend swimming lessons (Year 3, 4, 5, 6)?

Are they able to swim 25m? Yes No

Out of School Visits

I wish my child to be allowed to take part in educational visits/sports activities arranged during the school year. I also give permission for my child to travel on the school mini bus. I understand that on occasion, I may need to complete an additional consent form for a particular visit or event if there is travel outside of Merseyside.

I agree to trips within Merseyside without the need for additional consent forms

I agree to my child to travel in the school minibus

Internet Access

Children will access the internet as a routine part of their education. Pinehurst Primary School has robust filters in place.

I agree to my child accessing the internet

Sex Education

Pinehurst Primary School has a scheme of work tailored to children’s age and understanding of how our bodies change and reproduction cycle. More information is available on our website.

I agree to my child taking part in age appropriate sex education lessons

I confirm that I have read and understood what I am consenting to by ticking the relevant boxes on this form together with how and who with, this information may be shared.

Signed: *Parent/Carer* **Date:**/...../.....

Please note: By signing this form you are not restricting your legal rights or those of your child.

Mobile Phones

Code of conduct/acceptable use agreement

“I agree not to bring a personal mobile to school or on school trips/visits unless a teacher has permitted me to do so in writing”

Signed: *Parent/Carer* **Date:**/...../.....

Signed: *Pupil* **Date:**/...../.....

There are exceptions to this which will be agreed with individuals; in general this may be:

- The child travels to and from school without an adult

The school accepts no responsibility for mobile phones that are lost, damaged or stolen on school premises or transport, during school trips or visits, or while pupils are travelling to and from school.

Please now complete information on the back page of this form

Ethnicity (please tick)

Any other Asian background	
Any other Black background	
Bangladeshi	
Black-Ghanaian	
Black-Nigerian	
Black-Somali	
Black Caribbean	
Chinese	
Gypsy/Roma	
Indian	
Latin/South/Central America	
Other Black African	
Other ethnic group	
Other Gypsy/Roma	
Other mixed background	
Pakistani	
Roma	
Traveller of Irish heritage	
White-British	
White-Irish	
White and Asian	
White and Black African	
White and Black Caribbean	
White and Chinese	
White European	
White Other	
Yemeni	

Home Language (please tick)

Akan/Twi Fante		Luganda	
Albanian/Shqip		Manx Gaelic	
Amharic		Norwegian	
Arabic		Panjabi	
Bengali		Pashto/Pakhto	
Caribbean Creole English		Persian/Farsi	
Caribbean Creole French		Polish	
Chinese		Portuguese	
Cornish		Romany	
Danish		Russian	
Dutch/Flemish		Serbian/Croatian	
English		Bosnian	
Finnish		Sinhala	
French		Somali	
Gaelic(Scottish)		Spanish	
Gaelic/Irish		Swahili/Kiswahili	
German		Swedish	
Greek		Tagalog/Filipino	
Gujarati		Tamil	
Hebrew		Turkish	
Hindi		Urdu	
Igbo		Vietnamese	
Italian		Welsh/Cymraeg	
Japanese		Yoruba	
Korean			
Kurdish			
Lingala			

National Identity (please tick)

Welsh	
English	
Scottish	
Irish	
British	
Other	

Religion (please tick)

Buddhist	
Christian	
Hindu	
Muslim	
Sikh	
Other religion	
Refused	
No religion	

Asylum Status (please tick if applicable)

Asylum Seeker	
Refugee	

Speaks Welsh (please tick)

Fluent in Welsh	
Speaks Welsh but not fluent	
Cannot speak Welsh	

English as Additional Language (please tick)

YES	
NO	

Which country was the child born in?

If not born in the UK, when did your child arrive in this country?

Country of origin of Parents:

Passport/Asylum seeker number..... Date of issue...../...../.....