

St. James' Primary School

DATA COLLECTION SHEET

Please complete, sign and return to school if you have any changes to your child's details

Pupil Information

Surname..... **Forename(s)**.....
 Gender (F or M) Chosen name..... Date of birth

Home Address Post Code Home Telephone Number

Siblings:

Name(s) of sibling(s) in school.....Class/Year

Parent/Guardian and Emergency Contact Information

Contact Priority No. 1

Title..... Name Home Address Post Code Relationship to child Parental Responsibility (Y/N)	Home Telephone No Mobile No. Day Telephone No. Email
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Contact Priority No. 2

Title..... Name Home Address Post Code Relationship to child Parental Responsibility (Y/N)	Home Telephone No Mobile No. Day Telephone No. Email
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Contact Priority No. 3

Title..... Name Home Address Post Code Relationship to child Parental Responsibility (Y/N)	Home Telephone No Mobile No. Day Telephone No. Email
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Travel Arrangements (Please tick)												
<input type="checkbox"/>	Bicycle	<input type="checkbox"/>	Bus	<input type="checkbox"/>	Car/ Van	<input type="checkbox"/>	Walk	<input type="checkbox"/>	Taxi	<input type="checkbox"/>	Car Share	<input type="checkbox"/>
Meal Arrangements (Please tick)												
<input type="checkbox"/>	Free School Meal	<input type="checkbox"/>	Paid School Meal	<input type="checkbox"/>	Sandwiches	<input type="checkbox"/>	Home	<input type="checkbox"/>	Other			
Any other information regarding dietary needs:												

Medical Practice - Address & Telephone number
Medical Condition(s)/Notes

Educational History
Name(s) & Address(es) of Previous School(s)
Date(s) of Admission/ Leaving

Ethnicity	Religion	
Home Language	First Language	Other Language(s)

School Visits
I agree to my child taking part in school activities which involve local visits out of school Y / N

Photographs		
I agree for my child's photograph being used (please tick)		
Internal use at School <input type="checkbox"/>	On School publications <input type="checkbox"/>	In Local Newspapers <input type="checkbox"/>
	e.g. website, prospectus	with their name/local TV

Home/School Agreement

I accept the responsibility as a parent to help my child:

- Ensure that my child attends school regularly, and is brought and collected on time.
- Give reason for any absence on the first day by telephone and follow up with a letter on their return.
- Ensure that my child is properly equipped and all uniform/PE kit is labelled.
- Encourage my child to do their best and praise effort and achievement
- Encourage my child to be well behaved and have respect for all staff and pupils in school.

Y / N

<p>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 DfES.</p> <p>Signature: _____ Date: _____</p>
