



Admission Registration Form and Consent to Use Information

This form sets out:

1. Information we are seeking about you/your child that Mattishall Primary School needs in order to register the child with the School and to provide a suitable education. The School's privacy notice sets out how we use this information and your rights. Details of the privacy notice can be found at: www.mattishallprimary.org.uk or you can also ask for a copy of the notice from the School's office.
2. Information we are seeking about you/your child that it would be helpful for the School to use and share but is not a requirement to do so. We are seeking your consent for this.

1. Registration Details

You are required to provide this information to allow us to register your child with the School

(a) Details of the child to be admitted

We require this information to allow us to register your child with the School

Forename (as on Birth Certificate)		Other names (also known as)		Surname (<u>Legal</u> , not Preferred)	
If appropriate, underline the forename by which your child is known		Date of Birth			
Current Home Address		Gender (please ✓)			
Post code				M	
If the above is on a military camp, what is the name of the camp?					

(b) Details of the people who have legal parental responsibility for this child

We require this information to allow us send information to you and to contact you, for example, to keep your child safe in the case of an emergency

(Please list in order of priority for contact during the school day)

The Education Act 1996 defines a parent to include the natural parents of the child as well as a person who is not a parent but who has parental responsibility or who has care of the child.

	Relationship to your child	Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's
Parent	Daytime	Evening	Mobile		
				e-mail:	



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Parent					
	☎ Daytime	☎ Evening		☎ Mobile	
				e-mail:	
Parent					
	☎ Daytime	☎ Evening		☎ Mobile	
				e-mail:	
The usual arrangements for your child if living with different parents on different days of the week					
Additional Emergency Contacts					
People other than the above who can be contacted in an emergency.					
Relationship to the child	Mr, Ms etc	Forename	Surname	Home address, if different from the child's	
☎ Daytime		☎ Evening		☎ Mobile	
☎ Daytime		☎ Evening		☎ Mobile	
Other family details					
Please give details of any other children currently living at your child's home(s) and attending the school					
Children's names		DofB	Class		



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(c) Educational history We require this information to support pupil learning							
Last school attended							
The new school will obtain earlier educational school records from the school named below – this is a statutory requirement							
School name			Address			Telephone	
Dates attended above school				From		To	
Pre-school educational experience							
This only needs to be completed for children aged 7 or younger							
Dates	From		Please tick	Playgroup	Nursery	At home	Other
	To		<input type="checkbox"/>				
If your child has had any gaps in his/her education please provide detail below							
The start and end dates of the gap(s) and reason(s) are required.							

(d) Doctor, health care & other specific arrangements We require this information to keep your child safe, to support pupil learning and to provide appropriate pastoral care						
Name of doctor & surgery			Contact details of practice/health centre			
			The school has contact details of local doctors. If you are not using a local doctor, please supply the contact details separately.			
Has your child had a tetanus injection?		Yes	No	If yes, date		
INHALER	Does your child use one?	Yes	No	If yes, frequency taken		
	If yes, type of medication?					
Other medical information relevant to your child's development and school life e.g. hearing, sight, allergies, diabetes, epilepsy.						
Does your child have an Education, Health & Care Plan (EHCP)?					Yes	No



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If your child has other particular needs in relation to his/her education please describe them here:				
Please give details of any special dietary requirements your child may have?	Lunch time arrangements (please ✓ one box)			
		Paid	Free	
	School meals	<input type="checkbox"/>	<input type="checkbox"/>	
	Packed Lunch	<input type="checkbox"/>	<input type="checkbox"/>	
	Home	<input type="checkbox"/>	<input type="checkbox"/>	
How will your child normally get to and from school?				
		Is your child entitled to free transport?	Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What is the main language spoken at home? <i>(The school can only record what information the parent declares in this box.)</i>				

2. Further details

We seek your agreement to use and share the following details with the Department for Education (DfE) and Norfolk County Council to assist in the completion of the school's census under section 3 of The Education (Information About Individual Pupils) (England) Regulations 2013. This information allows the DfE to better plan to meet needs within the school system. For example, what extra support the DfE may need to provide to schools with high numbers of children who do not speak or understand English sufficiently to access the curriculum and the associated needs in the school system helps the DfE ensure that all children, wherever they are from, have the best possible education.

You do not have to give consent to do so and it will not affect the education that your child receives from the School.

Please note: a child may provide this information where they are deemed mature enough to have capacity to understand and agree to the use of and the sharing of their personal data with others.



(a) Ethnicity (The school can only record what information the parent declares in this section.)

Please tick the box that you believe best describes your child's ethnicity:

White			
British			
Irish		Sri Lankan Other	
Gypsy		Any other Asian background	
Gypsy / Roma		Chinese	
Other Gypsy/Roma		Chinese	
Traveller of Irish heritage		Black or Black British	
Albanian		Caribbean	
Bosnian-Herzegovinian		Angolan	
Croatian		Congolese	
Greek		Ghanaian	
Greek Cypriot		Nigerian	
Italian		Sierra Leonean	
Kosovan		Somali	
Portuguese		Sudanese	
Serbian		Other Black African	
Turkish		Any other black background	
Turkish Cypriot		Other ethnic groups	
Eastern European		Afghan	
Western European		Arab other	
White Other		Egyptian	
Mixed		Filipino	
White and Black Caribbean		Iranian	
White and Black African		Iraqi	
White and Pakistani		Japanese	
White and Indian		Korean	
White and any other Asian background		Kurdish	
Any other mixed background		Malay	
Asian and Asian British		Moroccan	
Indian		Thai	
Pakistani		Vietnamese	
Other Pakistani		An ethnic group not listed here:	
Bangladeshi		I do not wish to provide this information	

(b) Service child (The school can only record what information the parent declares in this section.)

Does your child have a parent (or parents) who is a current serving member of the regular HM Services, and is of Personal Marital Status Cat 1 or Cat 2?	Y/N
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3. Further details, continued

We seek your agreement to use and share the following details with the school. It will not be shared with the Department for Education (DfE) This information allows the school to better plan to meet needs within the school system, for example, dietary requirements, religious education, etc.

You do not have to give consent to do so and it will not affect the education that your child receives from the School.

Please note: a child may provide this information where they are deemed mature enough to have capacity to understand and agree to the use of and the sharing of their personal data with others.

Religion:



4. Statement [to be signed]

- a) I agree to the use and sharing of information as set out in paragraph 2 above
- b) I understand that I do not have to give agreement to this and it will not affect the education that my child receives
- c) I understand that there may be circumstances where the School will still share my information with other agencies without my agreement. This will include where it is necessary to safeguard myself or another individual or it is necessary for the prevention or detection of crime
- d) I understand that I can withdraw my agreement to the use and sharing of the information at paragraph 2 above any time (If you wish to do this please write to, email or contact the School Office)
- e) I understand that the information I have provided in this form will be forwarded to my child's new school when she/he changes school
- f) I believe the information provided in this form to be correct. I will inform the School of any changes that may occur whilst my child is attending the school.

Signed
(Parent/Guardian/
Child):

Date:

Thank you. When completed, please return this form to the school.

For School Office Use

Admission No		Records sent for	
Proof of birth certificate provided		School MIS updated	
Correct UPN recorded		Class allocated	