

This form sets out:

- Information we are seeking about you/your child that the **Heacham Infant and Nursery 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. You have already been provided with details of the privacy notice but if you want to look at it again, the notice can be found at:
<https://www.westnorfolkacademiestrust.co.uk/page/?title=Privacy+Notice&pid=35> or you can also ask for a copy of the notice from the School's office.
- 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	F
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:	

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

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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		

Relationship to the child	Mr, Ms etc	Forename	Surname	Home address, if different from the child's
☎ Daytime		☎ Evening		

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	DOB	Class	

(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.

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(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.

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Does your child have an Education, Health & Care Plan (EHCP)?	Yes	No

If your child has other particular needs in relation to his/her education please describe them here:

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Please give details of any special dietary requirements your child may have?	Lunch time arrangements (please ✓ one box)		
		Paid	Free
	School meals		
	Packed Lunch		
	Home		
How will your child normally get to and from school?			
	Is your child entitled to free transport?	Yes	No
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	<input type="checkbox"/>		
Irish	<input type="checkbox"/>	Sri Lankan Other	<input type="checkbox"/>
Gypsy	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>
Gypsy / Roma	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Other Gypsy/Roma	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Traveller of Irish heritage	<input type="checkbox"/>	Black or Black British	<input type="checkbox"/>
Albanian	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Bosnian-Herzegovinian	<input type="checkbox"/>	Angolan	<input type="checkbox"/>
Croatian	<input type="checkbox"/>	Congolese	<input type="checkbox"/>
Greek	<input type="checkbox"/>	Ghanaian	<input type="checkbox"/>
Greek Cypriot	<input type="checkbox"/>	Nigerian	<input type="checkbox"/>
Italian	<input type="checkbox"/>	Sierra Leonean	<input type="checkbox"/>
Kosovan	<input type="checkbox"/>	Somali	<input type="checkbox"/>
Portuguese	<input type="checkbox"/>	Sudanese	<input type="checkbox"/>
Serbian	<input type="checkbox"/>	Other Black African	<input type="checkbox"/>
Turkish	<input type="checkbox"/>	Any other black background	<input type="checkbox"/>
Turkish Cypriot	<input type="checkbox"/>	Other ethnic groups	<input type="checkbox"/>
Eastern European	<input type="checkbox"/>	Afghan	<input type="checkbox"/>
Western European	<input type="checkbox"/>	Arab other	<input type="checkbox"/>
White Other	<input type="checkbox"/>	Egyptian	<input type="checkbox"/>
Mixed	<input type="checkbox"/>	Filipino	<input type="checkbox"/>
White and Black Caribbean	<input type="checkbox"/>	Iranian	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	Iraqi	<input type="checkbox"/>
White and Pakistani	<input type="checkbox"/>	Japanese	<input type="checkbox"/>
White and Indian	<input type="checkbox"/>	Korean	<input type="checkbox"/>
White and any other Asian background	<input type="checkbox"/>	Kurdish	<input type="checkbox"/>
Any other mixed background	<input type="checkbox"/>	Malay	<input type="checkbox"/>
Asian and Asian British	<input type="checkbox"/>	Moroccan	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Thai	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Vietnamese	<input type="checkbox"/>
Other Pakistani	<input type="checkbox"/>	An ethnic group not listed here:	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	I do not wish to provide this information	<input type="checkbox"/>

(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	