

# S11/1 Data Collection on Admission to School: Pupil Information

This form is for completion by the Parent/Guardian of every child once they have been given a place at the school. Parents/Guardians must also complete S11/2 giving your contact details as well as information on people to be contacted in the event of an emergency.

Please provide as much of the following information as you can. If you need help in completing the form, please ask the School Administrator/Secretary/Bursar. The grey shaded areas are for the school's use. Please return your completed form to the school.

**PLEASE COMPLETE ALL SECTIONS**

# Pupil’s basic details

Legal surname\* Legal forename\*

Middle name: Date of birth:

Sex: 🞎 female 🞎 male (the sex of a person as recognised in law)

🞎 unknown, e.g. the question has not been asked

(schools: please note ‘unknown’ is not available for school census)

Gender: 🞎 girl 🞎 boy 🞎 other/non-binary

🞎 prefer to self-describe:

🞎 not known, e.g. question not asked, answer was refused

Preferred surname\* (if different):

Preferred forename\* (if different):

\* please see note under 'General Principles for Schools' on the S11/2 Contacts Information Form

**Please provide the pupils original Birth Certificate or in date Passport.**

For schools use only: Birth certificate seen?

Please state ‘yes’ if you have seen the child's Birth Certificate or any other legal document e.g. Deed Poll, specifying the Legal surname of the child

Admission Date: Admission number: UPN:

# Pupil’s address

Address

Postcode:

# Pupil’s medical details

**Emergency consent?** 🞎 Yes 🞎 No

e.g. the school has permission to give / arrange emergency treatment:

**Dietary needs:** please tick any that apply

🞎 Artificial colouring allergy 🞎 Kosher foods only 🞎 No Pork

🞎 Gluten Free 🞎 No dairy produce 🞎 Seaford allergy

🞎 Halal 🞎 No nuts of any type or quantity 🞎 Vegetarian

🞎 Vegan 🞎 No sugar 🞎 Pescatarian

🞎 Other (please specify):

**Medical practice**

**All medical details will be shared with staff members of Bow Community Primary School.**

Doctor’s name Surgery Name

Surgery address Surgery tel no

Does your child have a medical condition? 🞎 Yes 🞎 No

If yes please give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have a medical conditions/health concern that needs to be managed during the school day? 🞎 Yes 🞎 No

Does your child take prescribed medication during the day? 🞎 Yes 🞎 No

If yes please give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have a health care plan that needs to be followed in an emergency? 🞎 Yes 🞎 No

Does your child wear prescription glasses during the day at school? 🞎 Yes 🞎 No

Please list any allergies, symptoms and treatment.

**Image Consent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I give consent for my child’s image to be used 9tick boxes only that you agree with):

🞎 On displays in public areas of the school 🞎 In the media

🞎 School’s website 🞎 School’s Newsletter

🞎 Photos to be taken by an external photographer e.g Tempest

**Email Consent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I give consent to receive the following:

🞎 School newsletters/information relating to my child 🞎 Upcoming events e.g PTA, clubs

# Pupil’s ethnicity

**Ethnicity** ethnic information provided by: 🞎 parent 🞎 pupil

This has been requested by the Department for Education (DfE) and is collected in the DfE school census.

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture and ancestry or family history. Ethnic background is not the same as nationality or country of birth. The Information Commissioner recommends that young people aged 11 years old or above have the opportunity to decide their own ethnic identity. Parents, or those with parental responsibility, are asked to support or advise those children aged over 11 in making this decision wherever necessary.

Please note:

* the Ethnicity options detailed below are those captured within the Department for Education school census returns but schools can add as they consider appropriate.
* the availability of the sub-categories depend on schools’ individual MI systems.

Please tick one option only

**Asian or Asian British**

* Indian
* Bangladeshi
* Pakistani

or one of Pakistani sub-categories below:

* Mirpuri Pakistani
* Kashmiri Pakistani
* Other Pakistani

* Chinese

or one of Chinese sub-categories below:

* Hong Kong Chinese
* Malaysian Chinese
* Singaporean Chinese
* Taiwanese
* Other Chinese

* Any Other Asian Background

or one of Any Other Asian sub-categories below:

* African Asian
* Kashmiri Other
* Nepali
* Sri Lankan Sinhalese
* Sri Lankan Tamil
* Sri Lankan Other
* Other Asian

**Any Other Ethnicity** (as defined by Department for Education school census return)

* Any Other Ethnic Group

or one of sub-categories below:

* Afghan
* Arab Other (includes Palestinian, Kuwaiti, Jordanian and Saudi Arabian)
* Egyptian
* Filipino
* Iranian
* Iraqi
* Japanese
* Korean
* Kurdish (includes Kurdish pupils from Iraq, Iran and Turkey)
* Latin/ South/ Central American (includes Central/South America, Cuba, Belize)
* Lebanese
* Libyan
* Malay (includes Malaysian other than Malaysian Chinese)
* Moroccan
* Polynesian (includes Fijian, Tongan, Samoan and Tahitian)
* Thai
* Vietnamese
* Yemeni
* Other Ethnic Group

**Black, African, Caribbean or Black British**

* Black African

or one of Black African sub-categories below:

* Black - Angolan
* Black - Congolese
* Black - Ghanaian
* Black - Nigerian
* Black - Sierra Leonean
* Black - Somali
* Black - Sudanese (includes Sudanese of Egyptian origin)
* Other Black African (includes Black South African, Zimbabwean, Ethiopian, Rwandan and Ugandan)

* Black Caribbean (includes Antigua and Barbuda, Bahamas, Barbados, Dominica, Grenada, Guyana, Jamaica, St Kitts and Nevis, St Lucia, St Vincent & Grenadines, Trinidad and Tobago).

* Any Other Black Background

or one of Any Other Black sub-categories below:

* Black European
* Black North American (includes Black North American and Canadian)
* Other Black

**Mixed or Multiple**

* White and Black Caribbean
* White and Black African
* White and Asian

or one of White Asian sub-categories below:

* White and Pakistani
* White and Indian
* White and Any Other Asian Background
* Any Other Mixed Background

or one of Any Other Mixed sub-categories below:

* Asian and Any Other Ethnic Group
* Asian and Black
* Asian and Chinese
* Black and Any Other Ethnic Group
* Black and Chinese
* Chinese and Any Other Ethnic Group
* White and Any Other Ethnic Group
* White and Chinese
* Other Mixed Background

**White**

* White British

or one of White British sub-categories below:

* Cornish
* English
* Northern Irish
* Scottish
* Welsh
* Other White British

* White – Irish
* Traveller of Irish Heritage

* Gypsy / Roma

or one of Gypsy/Roma sub-categories below:

* Gypsy
* Roma
* Other Gypsy/Roma

* Any Other White Background

or one of Any Other White sub-categories below:

* Albanian
* Bosnian- Herzegovinian
* Croatian
* Greek/ Greek Cypriot
* Italian
* Kosovan
* Portuguese
* Serbian
* Turkish/ Turkish Cypriot
* White European (to be used if school does not collect on basis of country of origin)
* White Eastern European (including Russian, Latvian, Ukrainian, Polish, Bulgarian, Czech, Slovak, Lithuanian, Montenegrin and Romanian)
* White Western European (including Italian, French, German, Spanish, Portuguese and Scandinavian)
* White Other

**Do not wish to provide**

* Refused

# Pupil’s religious affiliation

Please tick one option

🞎 Baha’i 🞎 Christian 🞎 Jewish 🞎 Sikh 🞎 No Religion

🞎 Buddhist 🞎 Hindu 🞎 Muslim 🞎 Decline to answer

🞎 Other (please specify) \_\_\_\_\_\_\_\_\_\_\_

# Pupil’s first language

The Department for Education advise that this will help them understand a range of factors, allowing them to better plan to meet the needs within the school system.

What was the first language your child understood/spoke?

🞎 English 🞎 Decline to provide

🞎 Other (please specify)

# Asylum status

Please tick if either of the following apply:

🞎 this pupil is seeking asylum 🞎 this pupil is a refugee

# Additional details

**Meals**

Please indicate which of the following your child is most likely to have:

🞎 free school meal 🞎 home 🞎 sandwiches 🞎 school meal

Note: it is important that parents of Foundation / Key Stage 1 pupils apply for free school meals. For information on how to apply please visit <https://www.devon.gov.uk/educationandfamilies/school-information/school-meals>

**Mode of travel**

Please indicate which of the following your child is most likely to use to get to school:

🞎 bicycle 🞎 car share1 🞎 dedicated school bus2 🞎 taxi 🞎 walk

🞎 car/van 🞎 public service bus2 🞎 bus (type not known) 2 🞎 train 🞎 other

1 with child / children from a different household

2 bus route (if known)

**Service child**

Does this child have a parent(s) in regular HM Forces military units? 🞎 yes 🞎 no

This applies to children whose parents are designated as personnel category 1 or 2 (Pstat Cat1 or Pstat Cat2). For further information please see DfE guidance at <https://www.gov.uk/government/publications/personal-status-category-definitions>

**Recoupment**

The following information is required so that the Local Authority can recover the cost of educating children who are not its responsibility, mainly because the child's normal place of residence falls within a different Local Authority.

Please tick the appropriate box if you pay Council tax to one of the following Councils:

🞎 Cornwall 🞎 Plymouth 🞎 Torbay

🞎 Dorset 🞎 Somerset 🞎 Other (i.e. not Devon or one listed)

**Linked Agencies**

It is important that all the agencies who are working with a child work together to ensure better outcomes for that child. In order to do that, please identify any other agencies working with your child, for example Social Care (i.e. Social Services)\*, Youth Offending Team, Child and Adolescent Mental Health Services. Please list any agencies below:

\* If you indicated above that Social Care (Social Services) are involved in the care of your child, please tick if this child is 'In Care' (sometimes known as being 'Looked After') and state which Local Government Authority is responsible for this child, e.g. Devon, Torbay, etc. below.

* Child in care Local Authority responsible for child:

**Special Educational Needs**

* Please tick if this child has special educational needs, i.e. has an Education and Health and Care Plan (EHCP) or is currently being assessed.

**Previous School**

Please provide details of the last school attended (includes nursery schools/units or pre-schools/playgroups)

School name:

School address (if known):

School telephone number (if known):

Date of arrival at previous school \*

Date of leaving previous school \*

\* an approximate date would be helpful if the exact date is not known, e.g. Sept 2019

Reason for leaving, e,g. moved house, normal school transfer age

**Siblings**

Please provide details of any other children in your family with their dates of birth

Forename: Surname: date of birth:

Forename: Surname: date of birth:

Forename: Surname: date of birth:

By signing you are giving permission for Bow Community Primary School to share dietary information with staff in the school kitchen.

# Parent signature

**Your signature Date**

# What we (the school) does with the information you have provided on this form

In accordance with the requirements of the UK General Data Protection Regulation (UK GDPR), Bow Community Primary School has appointed a Data Protection Officer (DPO) who oversees data protection at the school.

The school has privacy notices available that provide information on what data the school holds, how it is used, who it is shared with and how long it is retained. The privacy notices for parents and pupils and the privacy notice for school volunteers can be accessed via the links below.

If after reading a privacy notice you have any questions relating to the data we hold or how we use it, please contact our Data Protection Officer, whose contact details are:

Name: One West (DPO)

Address:

One West

Baths and North East Somerset Council

Guildhall

High Street

Bath

BA1 5AW

Contact:

Email: [i-west@bathnes.gov.uk](mailto:i-west@bathnes.gov.uk)

Phone: 01225 395959

# What the Local Authority does with some of the information in this form

Devon County Council uses information about children and young people to enable it to carry out specific functions for which it is responsible. The Council also uses this personal data to derive statistics which inform decisions it makes (e.g.) regarding the funding of schools, assess their performance and to set targets for them. These statistics are used in such a way that individual children cannot be identified.

Further information on how the Local Authority uses your data is available from[Devon County Council Privacy Notices](https://www.devon.gov.uk/privacy/privacy-notices/)

# S11/2 data collection on admission to school: contacts information

# Pupil’s basic details

Name of child contact details are for

UPN (for schools use only)

Please give details of everyone who has parental responsibility (see Note of page 22) and anyone else to be contacted in an emergency. Please give details of parents / guardians first and give a low number in the “contact priority” box for any other people who should be contacted in an emergency. (Contact priority 1 is the first person to contact in an emergency, contact priority 2 is. the second person to contact in an emergency, etc).

**Please provide a minimum of two contacts.**

# Parent / contact details

Surname Forename

Title (e.g. Dr / Miss / Mr / Mrs / Ms / Mx / Other (please specify)

Gender: 🞎 female 🞎 male 🞎 other/non-binary

**Relationship to child** – please indicate which of the following applies:

🞎 parent 🞎 guardian 🞎 carer

Does this person have parental responsibility? 🞎 yes 🞎 no

please see end of document for guidance

Is there a court order relating to this child? 🞎 yes 🞎 no

**Contact priority** (1 – 5) where 1 is the first person to contact in emergency, 2 is the second person to contact, etc.

**Telephone number(s)** with STD numbers where appropriate, please indicate whether it’s a daytime number and add any notes if appropriate

home daytime no? 🞎yes 🞎no

work daytime no? 🞎yes 🞎no

mobile daytime no? 🞎yes 🞎no

**Email**

**Address** (if different from the address given for the child)

**First Language** If English is not your first language please state what is, this may include British Sign Language

Do you need a translator / signer?🞎 yes 🞎 no

Place of work

# Parent / contact details

Surname Forename

Title (e.g. Dr / Miss / Mr / Mrs / Ms / Mx / Other (please specify)

Gender: 🞎 female 🞎 male 🞎 other/non-binary

**Relationship to child** – please indicate which of the following applies:

🞎 parent 🞎 guardian 🞎 carer

Does this person have parental responsibility? 🞎 yes 🞎 no

please see end of document for guidance

Is there a court order relating to this child? 🞎 yes 🞎 no

**Contact priority** (1 – 5) where 1 is the first person to contact in emergency, 2 is the second person to contact, etc.

**Telephone number(s)** with STD numbers where appropriate, please indicate whether it’s a daytime number and add any notes if appropriate

home daytime no? 🞎yes 🞎no

work daytime no? 🞎yes 🞎no

mobile daytime no? 🞎yes 🞎no

**Email**

**Address** (if different from the address given for the child)

**First Language** If English is not your first language please state what is, this may include British Sign Language

Do you need a translator / signer?🞎 yes 🞎 no

Place of work

# Parent / contact details

Surname Forename

Title (e.g. Dr / Miss / Mr / Mrs / Ms / Mx / Other (please specify)

Gender: 🞎 female 🞎 male 🞎 other/non-binary

**Relationship to child** – please indicate which of the following applies:

🞎 parent 🞎 guardian 🞎 carer

Does this person have parental responsibility? 🞎 yes 🞎 no

please see end of document for guidance

Is there a court order relating to this child? 🞎 yes 🞎 no

**Contact priority** (1 – 5) where 1 is the first person to contact in emergency, 2 is the second person to contact, etc.

**Telephone number(s)** with STD numbers where appropriate, please indicate whether it’s a daytime number and add any notes if appropriate

home daytime no? 🞎yes 🞎no

work daytime no? 🞎yes 🞎no

mobile daytime no? 🞎yes 🞎no

**Email**

**Address** (if different from the address given for the child)

**First Language** If English is not your first language please state what is, this may include British Sign Language

Do you need a translator / signer?🞎 yes 🞎 no

**Place of work**

# Parent / contact details

Surname Forename

Title (e.g. Dr / Miss / Mr / Mrs / Ms / Mx / Other (please specify)

Gender: 🞎 female 🞎 male 🞎 other/non-binary

**Relationship to child** – please indicate which of the following applies:

🞎 parent 🞎 guardian 🞎 carer

Does this person have parental responsibility? 🞎 yes 🞎 no

please see end of document for guidance

Is there a court order relating to this child? 🞎 yes 🞎 no

**Contact priority** (1 – 5) where 1 is the first person to contact in emergency, 2 is the second person to contact, etc.

**Telephone number(s)** with STD numbers where appropriate, please indicate whether it’s a daytime number and add any notes if appropriate

home daytime no? 🞎yes 🞎no

work daytime no? 🞎yes 🞎no

mobile daytime no? 🞎yes 🞎no

**Email**

**Address** (if different from the address given for the child)

**First Language** If English is not your first language please state what is, this may include British Sign Language

Do you need a translator / signer?🞎 yes 🞎 no

**Place of work**

# Parent / contact details

Surname Forename

Title (e.g. Dr / Miss / Mr / Mrs / Ms / Mx / Other (please specify)

Gender: 🞎 female 🞎 male 🞎 other/non-binary

**Relationship to child** – please indicate which of the following applies:

🞎 parent 🞎 guardian 🞎 carer

Does this person have parental responsibility? 🞎 yes 🞎 no

please see end of document for guidance

Is there a court order relating to this child? 🞎 yes 🞎 no

**Contact priority** (1 – 5) where 1 is the first person to contact in emergency, 2 is the second person to contact, etc.

**Telephone number(s)** with STD numbers where appropriate, please indicate whether it’s a daytime number and add any notes if appropriate

home daytime no? 🞎yes 🞎no

work daytime no? 🞎yes 🞎no

mobile daytime no? 🞎yes 🞎no

**Email**

**Address** (if different from the address given for the child)

**First Language** If English is not your first language please state what is, this may include British Sign Language

Do you need a translator / signer?🞎 yes 🞎 no

Place of work

# Parental responsibility

The following guidance has been provided by the Department for Education on their GOV.UK web page;

<https://www.gov.uk/government/publications/dealing-with-issues-relating-to-parental-responsibility/understanding-and-dealing-with-issues-relating-to-parental-responsibility>

**What is parental responsibility?**

In family law, parental responsibility means all the rights, duties, powers, responsibilities and authority that a parent of a child has in relation to the child. A person with parental responsibility for a child has the right to make important decisions about their upbringing and is entitled to information about their child. For example, they can

* give consent to what medical treatment the child should receive
* make decisions about what education the child should receive, including which school they should attend
* receive information such as pupil reports

**Who has parental responsibility?**

A child’s birth mother (the person who carried the child) has parental responsibility unless it’s removed by an adoption order or a parental order following surrogacy.

Where a child’s father and mother were married to each other at the time of the child’s birth, they each have parental responsibility for the child. Where the parents were not married to each other at that time, the child’s father can gain parental responsibility:

* by registering the child’s birth jointly with the mother
* by subsequently marrying the child’s mother
* through a ‘parental responsibility agreement’ between him and the child’s mother which is registered with the court
* by obtaining a court order for parental responsibility

Where two female parents have a child through fertility treatment, the mother’s female partner is treated in the same way as a father. She has parental responsibility if she is married to or in a civil partnership with the mother at the time of the treatment (or if the two women agree in writing that she will be the child’s second parent). She can also acquire parental responsibility in the same way that a child’s father can.

People who are not the child’s biological mother, father or second female parent can also acquire parental responsibility, please see ‘Other ways to acquire parental responsibility’ below.

Civil partners have parallel rights to married people in terms of parental responsibility. The same provisions for married people apply to them in terms of:

* acquiring parental responsibility - adoption, agreement with their civil partner or by an order from the court
* holding parental responsibility

Same-sex parents;

* Civil partners will both have parental responsibility if they were civil partners at the time of the treatment, e.g. donor insemination or fertility treatment.
* For non civil partners, the 2nd parent can get parental responsibility by either:
* Applying for parental responsibility if a parental agreement was made
* Becoming a civil partner of the other parent and making a parental responsibility agreement or jointly registering the birth

**Other ways to acquire parental responsibility**

Parental responsibility can be acquired in other ways:

* adoption - only the adoptive parents will hold parental responsibility
* when a child is placed with prospective adopters they get parental responsibility for the child along with others holding parental responsibility, such as the local authority
* obtaining a parental order following surrogacy
* in the case of step-parents, through agreement with the child’s mother - and other parent if that person also has parental responsibility for the child - or as the result of a court order
* being granted a child arrangements order determining that the child should live with him or her, or if the court determines that a parent should only spend time with the child, the court may also decide to grant parental responsibility
* being appointed a guardian or special guardian
* being named in an emergency protection order - although parental responsibility in such a case is limited to taking reasonable steps to safeguard or promote the child’s welfare

A Local Authority can also acquire parental responsibility, if it’s named in the care order for a child.

More than one person, and even several people, can hold and exercise parental responsibility for a child. The parental responsibility of one party does not necessarily stop simply because another person is also given it, although this can happen. Therefore, in some cases, several people may exercise parental responsibility on behalf of a child.

Parental responsibility is not given to a foster parent or key worker in residential care but it’s essential that schools engage and work with these individuals, who are often the most influential and important people in the child’s life. How a school engages with social workers and the birth parents of the child in each case needs to be defined locally, but it’s an essential part of supporting the child’s school and care environment.

For further information please see: <https://www.gov.uk/parental-rights-responsibilities/who-has-parental-responsibility>

# General principles for schools

Everyone who is a parent, whether they are a resident or non-resident parent, has the same right to participate in decisions about a child's education and receive information about the child.

School staff must treat all parents equally, unless there is a court order limiting an individual's exercise of parental responsibility. Individuals who have parental responsibility for, or care of, a child have the same rights as biological parents, for example:

* to receive information e.g. pupil reports
* to participate in activities e.g. vote in elections for parent governors
* to be asked to give consent e.g. to the child taking part in school trips
* to be informed about meetings involving the child, e.g. a governors' meeting on the child's exclusion

We have received the following advice from the County Solicitor's office concerning pupil surnames:

Where only one person holds parental responsibility for a child, he or she has the legal right to effect a change of the child's surname without any permission or consent.

Where more than one person has parental responsibility for a child, the surname of a child can only be changed with the consent or agreement of all those having parental responsibility for a child.

Where two or more people have parental responsibility for a child and there is in force either a residence or care order, then one of those people can only lawfully cause a change of the child's surname if all other people with parental responsibility consent in writing.

In any other situation it is necessary for the person seeking to change a child's surname to obtain an appropriate order from a court.

All data provided to Bow Community Primary School is processed in accordance with current data protection legislation. This legislation gives you the right to know how your data or that of your child will be used, who it is shared with, how long it is retained and the lawful basis under which it is collected. These details are provided in our privacy notice which can be found on our website and can also be seen at the school upon request.