

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



Updated December 2010

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 shaded boxes are for school's use. Please return this form to the school.

School:

For Schools Use (Optional):

Admission No: UPN:

Basic Details of Pupil

Legal Surname*

Legal Forename

**See note under 'General Principles for Schools' on S11 2*

Gender: Male/Female (*Please delete as applicable*) Date of Birth

Middle Name(s)

Preferred Surname (*if different*) *

Preferred Forename (*if different*)

For Schools Use:

Birth Certificate etc. seen? ** Admission Date:

***Please tick this box 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.*

Address of Pupil (*incl. Postcode*)

Medical Details

Emergency Consent (*e.g. the school has permission to give/arrange emergency treatment*) Yes/No

Dietary Needs *Please circle any that apply*

Artificial colouring allergy | Gluten free | Halal | Kosher foods only | No dairy produce | No Nuts of any type or quantity | No pork | Seafood allergy | Vegetarian | Other *please specify below*

Doctor's Name, Surgery Address and Surgery Telephone No:

Does your child have any long-standing illnesses, health problems or disabilities which mean they require additional care, educational support or facilities eg ramp access? Yes/No

If you answered 'Yes' to the above, please complete S11/3 giving further information on the nature of the disability.

Note for School: *Disability Data is recorded under Linked Agencies in SIMS.net*

Other Medical Information eg asthma, diabetes

Ethnic/Cultural

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.

Ethnic/Cultural information was provided by: Parent Pupil

Please tick one box only, in each of the Ethnicity and Religious Affiliation categories and provide the information on Pupil's First Language.

Ethnicity

White		Black or Black British	
British	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Irish	<input type="checkbox"/>	African	<input type="checkbox"/>
Traveller of Irish Heritage	<input type="checkbox"/>	Any other Black background	<input type="checkbox"/>
Gypsy/Roma	<input type="checkbox"/>	Asian or Asian British	
Greek/Greek Cypriot	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Turkish/Turkish Cypriot	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Western European <i>Note 1</i>	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Eastern European <i>Note 2</i>	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>
Other <i>Note 3</i>	<input type="checkbox"/>	Any Other Ethnic Background	
Mixed		Afghan	<input type="checkbox"/>
White & Black Caribbean	<input type="checkbox"/>	Arab <i>Note 5</i>	<input type="checkbox"/>
White & Black African	<input type="checkbox"/>	Filipino	<input type="checkbox"/>
White & Asian	<input type="checkbox"/>	Iranian	<input type="checkbox"/>
Any other mixed background	<input type="checkbox"/>	Japanese	<input type="checkbox"/>
Chinese		Malay <i>Note 6</i>	<input type="checkbox"/>
Hong Kong Chinese	<input type="checkbox"/>	Thai	<input type="checkbox"/>
Other Chinese <i>Note 4</i>	<input type="checkbox"/>	Any other Ethnic group <i>Note 7</i>	<input type="checkbox"/>

I do not wish an ethnic background category to be recorded:

Notes:

1 **Western European** includes: Italian, French, German, Spanish, Portuguese and Scandinavian.

2 **Eastern European** includes: Russian, Latvian, Ukranian, Polish, Bulgarian, Czech, Slovak, Lithuanian and Romanian.

3 **Other White Background** includes: any white category not previously mentioned e.g. Albanian, Australian, Bosnian-Herzegovinian, Canadian, Croation, Kosovan, New Zealander, North American, Serbian/Yugoslavian.

4 **Other Chinese** includes: Mainland Chinese, Malaysian Chinese, Singaporean Chinese, Taiwanese, any other non-Hong Kong Chinese.

5 **Arab** includes: Palestinian, Kuwaiti, Jordanian and Saudi Arabian.

6 **Malay** includes Malaysian other than Malaysian Chinese (see Note 4).

7 **Any other ethnic group** includes any ethnic group not previously mentioned e.g. Egyptian, Iraqi, Korean, Kurdish (inc. Kurdish pupils from Iraq, Iran and Turkey), Latin/South/ Central American (inc. Cuban and Belizean), Lebanese, Moroccan, Polynesian (inc. Fijian, Tongan, Samoan & Tahitian), Vietnamese, Yemeni.

Pupil's First Language

What was the first language your child understood/spoke?

English
Other *Please specify*

Asylum Status *(please tick if either of the following apply)*

Is this pupil seeking asylum?

Is this pupil a refugee?

Religious Affiliation

Baha'i

Buddhist

Christian

Hindu

Jewish

Muslim

Sikh

Other *

No Religion

Decline to answer

* *Please specify*

Additional Details

Meals

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

- Free School Meal
- Home
- Sandwiches
- School Meal

Mode of Travel

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

- Bicycle
- Car/Van
- Car Share *(with child/children from a different household)*
- Public service bus*
- Dedicated school bus*
- Bus (type not known)*
- Taxi
- Train
- Walk
- Other

* Route *(if known)*

Does this child have a parent or parents in regular HM Forces military units? *Yes/No*
(Applies to children whose parents are Pstat Cat1 or Pstat Cat2)

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 | <input type="checkbox"/> | Somerset | <input type="checkbox"/> |
| Dorset | <input type="checkbox"/> | Torbay | <input type="checkbox"/> |
| Plymouth | <input type="checkbox"/> | Other <i>(i.e not Devon or one of the others listed)</i> | <input type="checkbox"/> |

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 (ie 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:

Please tick if this child has Special Educational Needs *(i.e. has a Statement for Special Education Needs or is currently being Assessed for a Statement)?*

Previous School

School last attended with telephone number (if known) *(this includes Nursery Schools/Units or pre-school/playgroup)*

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 September 2003*

Reason for leaving previous school: (e.g. moved house, normal school transfer age etc)

Other

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

Name:	Date of Birth:

Signed:

Date:

Please complete S11/2 Data Collection on Admission to School - Contacts

If your child is entitled to Free School Meals or to free transport or if you would like to find out, please contact the school office.

What we do with the information you have provided on the S11 (Data Protection)

Schools hold information on pupils and parents in order to run the education system,(ie to support the pupil's teaching and learning, to monitor and report on their progress, to provide appropriate pastoral care, and to assess how well the school as a whole is doing *) and in doing so have to follow the Data Protection Act 1998. This means, among other things that the data held must only be used for specific purposes allowed by law.

From time to time the school is required to pass on some of this data to the Local Authority (LA), to another school to which the pupil is transferring, to the Department for Education (DfE), Connexions (formerly the Careers service), Department of Health (DH) and Primary Care Trusts (PCTs), the Office for Standards in Education (Ofsted), Young Peoples Learning Agency (YPLA), Youth Offending Teams and other organisations working with Schools to provide a service to pupils, and to Qualifications and Curriculum Authority (QCA) which is responsible for the National Curriculum and associated assessment arrangements.

Pupils have certain rights under the Data Protection Act, including a general right of access to personal data held on them, with parents exercising this right on their behalf if they are too young to do so themselves. If you wish to access the personal data held about your child, then please contact the relevant organisation in writing:

- The School
- The LA's Information Compliance Officer at Devon County Council, Strategic Intelligence, Room L10, County Hall, Topsham Road, Exeter, Devon EX2 4QZ
- The QCA's Data Protection Officer at QCA, 83 Piccadilly, LONDON, W1J 8QA
- The Ofsted's Data Protection Officer at Alexandra House, 33 Kingsway, London WC2B 6SE
- The YPLA's Head of Records and Rights at Cheylesmore House, Quinton Road, Coventry, Warwickshire CV1 2WT
- The DH's Data Protection Officer at Skipton House, 80 London Road, London SE1 6LH
- The PCT's Information Governance Officer, Devon PCT, Dean Clarke House, Southernhay East, Exeter, Devon EX1 1PQ
- The DfE's Data Protection Officer at DfE, Caxton House, Tothill Street, LONDON, SW1H 9NA

**This information also includes National Curriculum assessment results, attendance information, characteristics such as ethnic group, special educational needs and any relevant medical information.*

S11/2 Data Collection on Admission to School: Contacts



Name of child these are the contact details for:

UPN *(for School's Use - Optional)*

Please give details of everyone who has parental responsibility (see Note below) and anyone else to be contacted in an emergency. Please give details of parents/guardians first, but give a low number in the Contact priority box if there are other people who should be contacted in an emergency. (Contact priority 1 i.e the first person to contact in an emergency, Contact priority 2 i.e. the second person to contact in an emergency etc)

Parental Responsibility

Parental responsibility can be shared between a number of people and section 576 of the Education Act 1996 defines these in the following terms

All natural (biological) parents, whether they are married or not;

Any person who, although not a natural parent, has parental responsibility for a child or young person
 Any person who, although not a natural parent, has care of a child or young person

Having parental responsibility means assuming all the rights, duties, powers, responsibilities and authority that a parent of a child has by law. People other than a child's natural parents can acquire parental responsibility through:

Being granted a residence order

Being appointed a 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)

Adopting a child

A local authority can acquire parental responsibility if it is named in the care order for a child

Your Details

Surname

Forename

Gender: Male/Female *Please delete as applicable*

Title *(e.g. Mr, Mrs, Miss, Ms, Rev. etc)*

Relationship to child *(Please select from the following)*

Mother | Father | Step-parent | Other Relative | Other Family Member | Self * | Childminder | Foster Parent | Carer | Social Worker | Religious/Spiritual Contact | Other contact

**Self i.e you are completing this form on your own behalf - being of legal age.*

Does this person have 'Parental Responsibility'? Yes/No *(Please delete as applicable)*

Is there a court order relating to this child? Yes/No *(Please delete as applicable)*

Contact priority (1 - 5)

Address *(If different from address given for child)*

Contact Information

Telephone Number(s) *(with STD numbers, where appropriate)*

Home

Work

Mobile

Other

Please tick if this is a daytime number

Notes

Email Address

Home

Work

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 *(Please delete as applicable)*

Place of Work

Parent/Contact

Surname

Forename

Gender: Male/Female *Please delete as applicable*

Title *(e.g. Mr, Mrs, Miss, Ms, Rev. etc)*

Relationship to child *(See list under 'Your Details')*

Does this person have 'Parental Responsibility'? Is there a court order relating to this child?

Yes/No *(Please delete as applicable)*

Yes/No *(Please delete as applicable)*

Contact priority *(1 - 5)*

Address *(If different from address given for child)*

Contact Information

Telephone Number(s) *(with STD numbers, where appropriate)*

Please tick if this is a daytime number

Notes

Home

Work

Mobile

Other

Email Address

Home

Work

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 *(Please delete as applicable)*

Place of Work

Parent/Contact

Surname

Forename

Gender: Male/Female *Please delete as applicable*

Title *(e.g. Mr, Mrs, Miss, Ms, Rev. etc)*

Relationship to child *(See list under 'Your Details')*

Does this person have 'Parental Responsibility'? Is there a court order relating to this child?

Yes/No *(Please delete as applicable)*

Yes/No *(Please delete as applicable)*

Contact priority *(1 - 5)*

Address (If different from address given for child)

Contact Information

Telephone Number(s) (with STD numbers, where appropriate)

Home

Work

Mobile

Other

Please tick if this is a daytime number

Notes

Email Address

Home

Work

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 (Please delete as applicable)

Place of Work

Parent/Contact

Surname

Forename

Gender: Male/Female Please delete as applicable

Title (e.g. Mr, Mrs, Miss, Ms, Rev. etc)

Relationship to child (See list under 'Your Details')

Does this person have 'Parental Responsibility'? Yes/No (Please delete as applicable)

Is there a court order relating to this child? Yes/No (Please delete as applicable)

Contact priority (1 - 5)

Address (If different from address given for child)

Contact Information

Telephone Number(s) (with STD numbers, where appropriate)

Home

Work

Mobile

Other

Please tick if this is a daytime number

Notes

Email Address

Home

Work

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 *(Please delete as applicable)*

Place of Work

Parent/Contact

Surname

Forename

Gender: Male/Female *Please delete as applicable*

Title *(e.g. Mr, Mrs, Miss, Ms, Rev. etc)*

Relationship to child *(See list under 'Your Details')*

Does this person have 'Parental Responsibility'?

Yes/No *(Please delete as applicable)*

Is there a court order relating to this child?

Yes/No *(Please delete as applicable)*

Contact priority

(1 - 5)

Address *(If different from address given for child)*

Contact Information

Telephone Number(s) *(with STD numbers, where appropriate)*

Please tick if this is a daytime number

Notes

Home

Work

Mobile

Other

Email Address

Home

Work

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 *(Please delete as applicable)*

Place of Work

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 natural 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.

8. Biometric Information Consent for Cashless Catering

Having read guidance provided to me by Clyst Vale Academy Trust:

EITHER (please tick as appropriate)

I give consent to information from the scan of the above named child's fingerprint being taken and used by Clyst Vale Academy Trust for use as part of an automated biometric recognition system for the College's cashless catering system.

I understand that I can withdraw this consent at any time in writing.

OR

I wish the above named child to be issued with a PIN code for use with the cashless catering system in the College.

9. Consent

Permissions to use my child's images/videos for displays in College

I agree

I do NOT agree

Permission to use my child's images/videos on the College Facebook page

I agree

I do NOT agree

Permission to use my child's images for printed publications – external use only

I agree

I do NOT agree

Permission to use my child's images for use in media/press.

I agree

I do NOT agree

Permission to use my child's images or video footage on the college website.

I agree

I do NOT agree

Permission for my child to access the internet at school.

I agree

I do NOT agree

Careers Advisor

(Permission for Careers South West advisors to assist the student with career advice)

I agree

I do NOT agree

Please see weblink below for Department for Education privacy notice template and data protection toolkit;

<https://www.gov.uk/government/publications/data-protection-and-privacy-privacy-notice>

<https://www.gov.uk/government/publications/data-protection-toolkit-for-schools>

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 in "What the LA does with your data" guide <https://new.devon.gov.uk/supportforschools/administration/information-governance/privacy-notice>

Name of child these are the Disability details for:

UPN (for School's Use - Optional)

Schools are committed to making sure that school is a happy and successful experience for all children and young people. Where a child has a particular difficulty or need, the school will do its best to put measures in place to overcome this. It would therefore be helpful if you would complete the information below.

Please indicate whether your child has any long-standing illnesses*, health problems or disabilities which mean they have substantial difficulties with any of the areas of his/her life shown below? Please tick **all** that apply.

**By long-standing we mean anything that has troubled them over a period of at least 12 months or that is likely to affect them over at least 12 months. Please exclude difficulties that you would expect for a child of that age.*

If you would rather discuss this issue with a member of staff than complete this form, please let the School Administrator know and an appointment will be arranged with the appropriate member of staff.

- Mobility - moving around indoors or outdoors
- Hand movements - touching or holding
- Personal care - going to the toilet, dressing
- Eating and drinking without help, or has an eating disorder
- Taking medication
- Incontinence - wetting or dirtying
- Communication - speaking with others, or understanding them
- Learning - numbers, letters, words
- Hearing
- Vision
- Behaviour - very active, has a short attention span, behaves unacceptably
- Has fits or seizures (Problems with consciousness)
- Diagnosed with autism or Asperger Syndrome
- Has a life-limiting condition or requires palliative care (e.g. pain management)
- Other e.g. can be depressed or anxious (Please describe other areas of great difficulty)

Notes:

The above categories are from the Disability Discrimination Act 2005 (DDA) and are now incorporated into the Single Equality Act (2010).

Schools should note that some of the above conditions are subject to change and information for this child may need to be updated in future.

Further guidance on this matter is available from:

http://www.education.gov.uk/childrenand_youngpeople/specialeducationalneeds/a0065985/disability-toolkit Schools are asked to assist parents in accessing the information on this website if they have no access to a computer.