

## Herrick Primary School

**Pupil Information Sheet** 

For office use only	
Date Admitted:	
B/C seen:	
UPN:	
SIMS Input date:	
Entered by:	

PUPIL INFORMATION						
CHILDS LEGAL SURNAME			CHILDS LEGAL FORENA AND MIDDLE NAME	ME		
PREFERREDFIRSTNAME	(If different from above)					
DATE OF BIRTH		I	Male		Female	
HOME ADDRESS (Including Post Code)			i			
HOME TELEPHONE NO.			WITHWHOMDO LIVE? (Father, Mo			
		PARENT IN	NFORMATION			
Please give details of a emergency. If applicable	II persons who have p e, please indicate by * th	arental respons le custodial parei	sibility. Please put in nt. We require by law to	order you wish prequest this inf	to be contacted in a ormation.	an
1. FULL NAME (Mr/Mrs/Miss/Ms/Other)			Mobile Teleph	one No.		
Relationship to child			Home Teleph	one No.		
Email address			Work Telepho	one No.		
Home Address (If different from child)						
2. FULL NAME (Mr/Mrs/Miss/Ms/Other)			Mobile Teleph	one No.		
Relationship to child			Home Teleph	one No.		
Email address			Work Telepho	one No.		
Home Address (If different from child)						
OTHER LOCAL EMERGENCY CONTACT INFORMATION						
Please give another day	time contact in case	of emergencies.	•			
3. FULL NAME (Mr/Mrs/Miss/Ms/Other)			Mobile Teleph	none No.		
Relationship to child			Home Teleph	one No.		
	1					
4. FULL NAME (Mr/Mrs/Miss/Ms/Other)			Mobile Teleph	none No.		
Relationship to child			Home Teleph	none No.		

GP / SURGERY CONTACT INFORMATION									
GP/Surgery/Tel. No.									
I give permission for school to TAKE MY CHILD TO HOSPITAL IN AN EMERGENCY					YES /	NO			
	HE	ALTH/ME	DICAL II	NFORMATI	ON/	DIETERY N	EEDS		
Information about you	ır child's	health and any	medication	/our child is on i	ncluo	ding allergies, as	thma, epi	ilepsy, diabe	tes, etc.
MEDICAL INFORMATI	ON OR								
CONDITIONS									
ANY DIETARY NEEDS OR FOOD ALLERGIES						cation Needs – any SEN progra	-		
			E	ETHNICITY					
We require informatior comes from Somalia n	n of your o nay be So	child's ethnic ori omali – but this c	gin, <u>not his/h</u> child may hav	<u>er nationality</u> . F /e British Citizer	or ex nship	ample, the ethnic or Nationality	origin of	a child whose	e family
Asian - African	So	mali	White	- British		Indian		Any other	
Asian - British	Pa	kistani	White	– European		Any other Whit	e	Backgrour Any other	
Asian – Mixed	Ba	ngladeshi	Caribb	ean – Black		background Any other mixe	ed	Group	
race Asian - Other	Po	lish	Caribb	ean – Mixed		background			
			Race	ean – wixeu	ed Any other White Background				
Home Language				Religion:	1	Muslim 🛛 Hir	ndu 🗆	Christi	an 🗆
First Language				English addi			Other 🗆		
	Dist			Language:			Yes		•
Childs's Country of	r Birth			Date entered applicable)		the UK (If			
		PF	REVIOUS	SCHOOL /	SIB	LINGS			
Previous schools/Nu attended:	irsery						ngth of ti		
Address						ephone I	-		
OTHER CHILDREN AT HERRICK PRIMARY SCHOOL									
Child's name						Cla	ISS		
Child's name Class									
Travel to school by:									
Bus Car Walk Cycle Other									
DATA PROTECTION									
This information will be held by us in compliance with the General Protection Data Regulation (GDPR) for the safeguarding of the children in the setting. It may be passed on to other bodies e.g. the Local Authority, Ofsted or other appropriate agencies as required to fulfil our obligations under our Ofsted registration.									



CHILDS NAME	CLASS	

## PARENTAL PERMISSION 2019 - 2020

Parents / carers will be notified of all trips and events but will not be asked to return permission slips if you have signed below. The slip will cover the whole of the academic year.

In line with 'Safeguarding Children in Education' regulations and also in line with GDPR, the school needs to have
permission for children to be photographed in school for any reason, particularly in the following circumstances:

PHOTOGRAPHS IN SCHOOL AND ON SCHOOL WEBSITE

DATE:

•	Displays within school	YES / NO
•	School prospectus brochure	YES / NO
•	School website	YES / NO
•	Residential and/or school day trips	YES / NO

For publication in newspaper articles relevant to the school
YES / NO

I give permission for my child's photographic or video image to be made available by the school on either the school website, in printed publications or other media for educational purposes only.

## I give permission for my child's photo to be used. $\Box$

PRINT NAME

SIGNATURE

Please note that you can withdraw your consent at any time by contacting the school.

PRINT NAME		
SIGNATURE	DAT	E