DATA COLLECTION FORM Please complete the details below and	d return this fo	orm to v	our child	's te	acher	. ae e	on as no	eeil	hle				
Preferred Surname:	21044 dila retain tins form to your				Legal Surname:								
			(if different) Legal Forename:					+					
Preferred Forename:			(if di			aiiic.							
Middle name:			Gen	Gender:					Male / Female				
Date of Birth:			Bro	Brother/Sister in School					Yes/No				
Name(s) of Brother/Sister(s)													
Address:													
(Must include House Name or House Number)						st Co							
Please give details of all persons who an emergency. Place them in the price	have parental prity/order that	respon	nsibility ar rish for the	าd a em f	nyone to be o	e else contac	you wish	to	be conta	cted in			
* University of the Company of the C	nship to Pupi			All the second									
Surname:	Forename:							Title:		Mr/Mrs/M	s		
Address:	\ddress:									Postcode:			
Home Tel:			Mobile:					TextService (see Overleaf):					
Work Tel:			Email							Ш			
2. Parent /Guardian Relationship to Pupil e.g. Parent/Step-parent:													
Surname:	•					Title:			Mr/Mrs/M	s			
Address:								Postcode:					
Home Tel:			Mobile: TextService (see Overlea								eaf):		
Work Tel:			Email:										
3. Other Contact Relations	ship to Pupil	e.g Gra	ndparent/C	hild	minde	r:							
Surname:						Title:			Mr/Mrs/M	s			
Home Tel:		Mobile:											
Meal Arrangements (Circle approp	riate choice	below	')				Eligible	for	Free Ma	eals Yes	/No		
Free School Meal Paid School Meal Sandwich			Home	lome Other				9.000					
Medical Practice:			Telephone:										
Address of Medical Practice:													
Medical Information:													
Special Dietary Needs:	8		4										
Ethnicity (See overleaf): Home Language (See overle					Religion (See overleaf):								
Previously registered with a Sure	Start project	(Circle	appropria	ate (choice	e)	Ye	s	No	Do not kr	now		
Attended a Sure Start Programme) Ye	s	No	Do not kr				
Pre-School Experience (Circle appropriate choice): Nursery School or Nursery class in a PS No pre-school experience (Circle appropriate choice): Nursery School or Nursery class in a PS							ool education	on					
Nursery Unit within a Special School Reception class or group in a PS Voluntary or private playgroup Unknown									wn				
Previous School:					Date of Admission:								
Reason for Leaving:				Date of Leaving:									
The data being collected, controlled and proc The school has a duty to protect this data and Authority and with the Department of Educat	to keep it up to								ta with the	Education			
Signature:		man king dipantahan kind dipandahan					Date:		T an annual and a second				

FOR OFFICE USE

Date of Admission to School:

Class:

Data entered: