St Maria Goretti Two Year Old Pupil Data Collection Form

This form should be completed by parents or by those who have parental responsibility or day to day care of the child. Please keep school informed of any changes to this information such as new mobile telephone numbers, changes of address, etc.

PUPIL INFORMATION

Legal surname		**Legal forename**	
Middle name(s)		**Preferred forename**	
Date of birth		**Sex**	Female / Male
Year group		**Previous school or nursery**	
Ethnicity		**Religion**	
First language		**Usual mode of travel**	Walk / Cycle / Car / Taxi
Home address, **including postcode (where child normally resides)**		**Names and dates of birth of siblings,** **including step-siblings**	
Lunch meal type **(please circle one only)** **NOT APPLICABLE**	~~School Meal (paid)~~ ~~Free School Meal~~ ~~Universal Free~~ ~~Packed Lunch~~	**Special dietary requirements**	
Doctor's name, address and telephone number		**Confidential Collection Password**	
Any other relevant information: **medical conditions (allergies, asthma, etc), disability, Social Care, Legal Orders, etc**			
Medical		**Legal**	
Social Care and other agencies		**Other**	

PARENT INFORMATION: MOTHER (Please underline the main contact telephone number)

Surname		**Forename**	
Date of birth		**Email address**	
Home address, including postcode		**Can this person collect the child from school?**	Yes / No
Does this person have parental responsibility?	Yes / No	**Is this person an emergency contact?**	Yes / No
Telephone numbers	Home:	Mobile:	Work:

PARENT INFORMATION: FATHER (Please underline the main contact telephone number)

Surname		**Forename**	
Date of birth		**Email address**	
Home address, including postcode		**Can this person collect the child from school?**	Yes / No
Does this person have parental responsibility?	Yes / No	**Is this person an emergency contact?**	Yes / No
Telephone numbers	Home:	Mobile:	Work:

If there are any other persons who have parental responsibility or can be deemed a 'parent' (eg step parent, or parent's partner), please provide details below. Please underline the main contact telephone number. Continue on a separate sheet if necessary (ie more than one additional person with parental responsibility, etc).

Surname		**Forename**	
Date of birth		**Email address**	
Home address, including postcode		**Can this person collect the child from school?**	Yes / No
Does this person have parental responsibility?	Yes / No	**Is this person an emergency contact?**	Yes / No
Relationship to child			
Telephone numbers	Home:	Mobile:	Work:

OTHER EMERGENCY CONTACTS – IN PRIORITY ORDER

Please provide below the names of any other people who can be contacted by school in an emergency (these may be family members, not identified overleaf, or friends). Please underline the main contact numbers.

Surname		**Forename**	
Relationship to child		**Can this person collect the child from school?**	Yes / No
Telephone numbers	Home:	Mobile:	Work:

Surname		**Forename**	
Relationship to child		**Can this person collect the child from school?**	Yes / No
Telephone numbers	Home:	Mobile:	Work:

Surname		**Forename**	
Relationship to child		**Can this person collect the child from school?**	Yes / No
Telephone numbers	Home:	Mobile:	Work:

Names of any other people who are permitted to collect your child from school	

Do you give permission for your child's photograph to be used in school publications (including our website) and in the local media?	Yes / No

Name of person completing this form _____ **Date** _____

Signature _____ **Relationship to child** _____

The school is registered under the Data Protection Act 2018 to keep the information submitted on this form. Pupil data is used for statutory returns to the Local Authority and the Department for Education. For information about how the school uses personal information please refer to the privacy notice displayed on the school website.

School office use: Birth certificate seen? Yes / No **Birth certificate seen by:** _____

Eligibility Form Yes/ No **Paying?** Yes/No **Early Education Funding Form** Yes / No

Weekly Pattern

Mon		**Tues**		**Wed**		**Thur**		**Fri**	
YES	**NO**	**YES**	**NO**	**YES**	**NO**	**YES**	**NO**	**YES**	**NO**