



SCHOOL ADMISSION FORM

Please complete all three sides then sign on the last page.

The Data Protection Act (1998) and the Education (School Records) Regulations (1989) protect this strictly confidential information, stored on the school's student records database. The information on ethnic origin and first language is needed by the school and by Cambridgeshire Learning Authority. This is to ensure that resources are made available when required and that the Education Service offers real equality of opportunity for all pupils.

Legal Surname(as it appears on student's birth certificate)

Legal Forename(as it appears on student's birth certificate)

Middle name(s)

Known as Gender.....Male / Female

Date of Birth

Home Address

Postcode Telephone number

In Local Authority Care Yes/No If Yes, Name of Care Authority

Name & address of previous school.....

.....
If this school is overseas, please give name and address of any previous UK school attended (primary or secondary)

.....

SERVICE CHILDREN IN SCHOOL

Schools are now required to indicate whether a child has a parent(s)/guardian(s) currently serving in regular military units of any of the armed forces, and designated as Personnel Category 1 or 2. Please could you indicate if your child is a 'service child in education' by ticking one of the boxes below.

No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	I do not wish a service children indicator to be recorded	<input type="checkbox"/>
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CONTACT INFORMATION

Please provide details of three parents/guardians/contacts below and place them in the order you wish them to be contacted in an emergency.

Please tell us if the information changes; we need to be able to contact you quickly if your child is ill.

PRIORITY 1 CONTACT

Title.....SurnameForename.....

Relationship to student Parental responsibility..... YES / NO

Home address

.....Postcode.....

Home telephone numberHome email.....

Work address.....Work email.....

PRIORITY 2 CONTACT

Title.....SurnameForename.....
Relationship to student Parental responsibility..... YES / NO
Home address
.....Postcode.....
Home telephone numberHome email.....
Work address.....Work email.....
Work telephone number Mobile telephone number

PRIORITY 3 CONTACT

Title.....SurnameForename.....
Relationship to student Parental responsibility..... YES / NO
Home address
.....Postcode.....
Home telephone numberHome email.....
Work address.....Work email.....
Work telephone number Mobile telephone number

**SEPARATED PARENT INFORMATION – For parents not living with student
Please specify contact priority (if any).....**

Under the 1989 Children’s Act all parents have the right to receive information about their child’s progress.

Title.....SurnameForename.....
Relationship to student Parental responsibility..... YES / NO
Home address
.....Postcode.....
Home telephone numberHome email.....
Work address.....Work email.....
Work telephone number Mobile telephone number

Court Case Yes/No Address can be Disclosed Yes/No

MEDICAL DETAILS

Doctor
Address and telephone number
Please state any medical conditions of which you wish the school to be made aware, (e.g. asthma, epilepsy, allergies)
.....
.....

Does your child have any Special Needs Provision YES / NO

If YES *School Action / School Action Plus / Statement ? (*Please delete accordingly)

PERSONAL INFORMATION

To help us and the local authority in monitoring equal opportunities you are asked to complete the following:

- Country of birth
- Family's Ethnic Origin. (Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, culture, ancestry or family history. Ethnic background is not the same as nationality or country of birth.)

White - British	
White - Irish	
White - Traveller of Irish Heritage	
White - Gypsy/Roma	
White - Any other White background	
Mixed - White and Black Caribbean	
Mixed - White and Black African	
Mixed - White and Asian	
Mixed - Any other mixed background	
Asian or Asian British -Indian	
Asian or Asian British - Pakistani	
Asian or Asian British - Bangladeshi	

Any other Asian background (This includes African Asian, Nepali, Sinhalese, Sri Lankan Tamil...)	
Black or Black British -Caribbean	
Black or Black British -African	
Any other Black background	
Chinese	
Any other ethnic group – please circle one. (This includes Afghan, Arab, Egyptian, Filipino, Iranian, Iraqi, Japanese, Korean, Kurdish, Latin American, Lebanese, Libyan, Malay, Mauritian, Moroccan, Polynesian, Thai, Vietnamese, Yemeni...)	
I do not wish an ethnic background to be recorded	

- Date of arrival in UK (if relevant).....
- First languageOther language(s).....
- Religion
- If there are any religious or cultural practices of which the school should be aware, please specify.
.....
- Lunch arrangements - School Meal / Free School Meal / Packed Lunch / Home
- Please give the name, gender and date of birth of any other children in your family.
Name Date of BirthMale / Female
Name Date of BirthMale / Female
Name Date of BirthMale / Female

TRAVEL ARRANGEMENTS

Linked to the Government's Travel to School Initiative, we are currently refining a school travel plan, which details how our students travel to and from school. We would be grateful if you could tell us what mode of transport your child normally uses. Where he/she uses more than one mode of travel for each journey to school, you should tell us the most frequently used and/or the longest element of the journey by distance.

School Bus		Public Transport Bus		Bicycle		Walking		Train	
Taxi		Car/Van		Car Share				Other	

It is often desirable in the course of our work to take children off the school site at short notice to enable them to study at first hand (eg visit the library, Tesco, nature walk, church, etc). Please tick this box if you are happy for your child to take part in activities off the school site.

I certify that, to the best of my knowledge, the information on this form is correct.

Signature:.....Parent/Guardian

Date

PHOTOGRAPH/VIDEO PERMISSION FORM

Childcare Provider: Bar Hill Community Primary School

I am the parent/legal guardian of the child named below and I give permission for my child to be photographed or videotaped whilst in the care of the provider named above for the following purposes (please fill in one sheet for each child in the school):

School Photo Album

School Display

School Concerts

Outside Exhibition

Staff Coursework

Printed Media

School Web Site

Sport Events / Competitions

Child's Name [Block Capitals]

Parent/Guardian's Name [Block Capitals]

Address

Parent/Guardian Signature

Date