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 $\underline{\text{once}}$ 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.

For Schools Use (Optional <u>):</u>
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)
Parental consent
I do not wish emergency medical treatment to be provided to my child I do not wish my child to be photographed, including for the school website and local media I do not consent to local off-site visits during the school day I do not wish to be signed up for the school blog I do not wish to be enrolled as member of the Dartmoor Cooperative Learning Trust Additional Comments:
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:

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 as	thma, diabetes		
thnic/Cultural			
Our ethnic background describes	s how we think of our	selves. This may be based on	many things, including, for example,
			and is not the same as nationality
			ole aged 11 years old or above have responsibility, are asked to support or
advise those children aged over	11 in making this dec	cision wherever necessary.	
Ethnic/Cultural information	was provided by:	Parent D	upil 🗌
Please tick one box only, in each First Language.	of the Ethnicity and	Religious Affiliation categories	and provide the information on Pupil's
Ethnicity			
White		Black or Black British	_
British Irish		Caribbean African	
Traveller of Irish Heritage		Any other Black backgrour	nd 🗀
Gypsy/Roma		Asian or Asian British	
Greek/Greek Cypriot Turkish/Turkish Cypriot		Indian Pakist _a ni	
Western European Note 1		Bangla deshi	nd \square
Eastern European Note 2		Any other Asian backgrour	
Other Note 3 Mixed		Any Other Ethnic Backgrou	
White & Black Caribbean		Arab <i>Note 5</i>	
White & Black African		Filipino	
White & Asian Any other mixed background		Iranian Japan _e se	
Chinese		Malay Note 6	
Hong Kong Chinese Other Chinese Note 4		Thai Any other Ethnic group <i>No</i> i	to 7
			:e /
I do not wish a	n ethnic background	category to be recorded:	
Western European includes: Italia	n, French, German, Sp	anish, Portuguese and Scandina	vian.
Eastern European includes: Russi			
anadian, Croation, Kosovan, New Ze			nian, Australian, Bosnian-Herzogovinian,
Other Chinese includes: Mainland	Chinese, Malaysian Ch	ninese, Singaporean Chinese, Ta	iwanese, any other non-Hong Kong Chinese
Arab includes: Palestinian, Kuwaiti Malay includes Malaysian other tha			
	,	,	, Iraqi, Korean, Kurdish (inc. Kurdish pupils
om Iraq, Iran and Turkey), Latin/Sou ongan, Samoan & Tahitian), Vietnam	,	nc. Cuban and Belizean), Lebane	ese, Moroccan, Polynesian (inc. Fijian,
nigari, Samoari & Farilliari), Vietriarii	ese, remem.		
Pupil's First Language			Religious Affiliation
What was the first language your cl	nild understood/spoke?		Baha'i Buddhist
English			Christian
Other <i>Please specify</i>			Hindu
			Jewish Muslim
			Sikh
Acylum Status (places tick if sit	har of the following an	n/v)	Other *
Asylum Status (please tick if eith Is this pupil seeking asylum?	iei oi uie ioliowiliy app	oly)	No Religion Decline to answer
			* Please specify
Is this pupil a refugee?		-	г ісаэс <u>эр</u> есіі ў

dditional Details	;			
<u>Meals</u>			Mode of Travel	
Please tick to ind	licate which of the follo	owing your	Please tick to indicate which of the following your child is	
child is most likel		3 /	most likely to use to get to school:	
Free School Me			Bicycle	
Home	Ī	=	Car/Van	
Sandwiches	Ī		Car Share (with child/children from a	
School Meal	Ī	=	different household)	
			Public service bus*	
			Dedicated school bus*	
			Bus (type not known)*	
			Taxi	
			Train	
			Walk	
			Other	
			* Route (if known)	
)
	ave a parent or parents ren whose parents are			
			authority can recover the cost of educating children who are place of residence falls within a different Local Authority.	2
Please tick the ar	opropriate box if you p	av Council tax to	one of the following Councils:	
	Cornwall		Somerset	
	Dorset		Torbay	
	Plymouth		Other (i.e not Devon or one of the others listed)	
	,			
Linked Agencie	es			
order to do that,	please identify any oth	ner agencies worl	th a child work together to ensure better outcomes for that king with your child for example Social Care (ie Social Servicalth Services. Please list any agencies below:	
child is 'In Care'		s being 'Looked .	s) are involved in the care of your child, Please tick if this After') and state which Local Government Authority is	
Please tick if this Assessed for a State		itional Needs (i.e.	has a Statement for Special Education Needs or is currently being	
revious School				
	ded with telephone num	nber (if known) <i>(ti</i>	his includes Nursery Schools/Units or pre-school/playgrou	(<u>q</u>)
	-	, -		
Date of arrival at	previous school *			
Date of arrivar at	previous scriour			J
Date of leaving p	revious school *			

^{*}An approximate date would be helpful if the exact date is not known e.g September 2003

	L	_	_
т	n	_	r

Please give details of any other children in your family with their dates of bi	Please	give details of	any other	children	in vour	family with	their	dates o	of birt
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Name:	Date of	Birth:
Signed:		
Date:		
Please complete S11/2 Data Collection on Ad	mission 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 OCA's Data Protection Officer at OCA, 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 othe 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 Please tick if this is a daytime number Output
Work
Mobile
Other

Email Address			
Home			
Work			
I <u>f English is not</u>	your first language, please state wha	at is <i>(this may include British Sign Language)</i> :	
Do you need a t	translator/signer?	Yes/No (Please delete as applicable)	
Place of Work			
arent/Contact			
Surname			
Forename			
Gender: Male/F	emale <i>Please delete as applicable</i>	<u> </u>	
Title (e.g. Mr, Mrs	s, Miss, Ms, Rev. etc)		
Relationship to o	child <i>(See list under 'Your Details')</i>		
Does this person	n have 'Parental Responsibility'? order relating to this child?	Yes/No (Please delete as applicable) Yes/No (Please delete as applicable)	
Contact priority		() co, no () cost acopplication	
	mation nber(s) (with STD numbers, where	Please tick if this is a Notes daytime number	
Work			
Mobile			
Other			
Email Address			
Home			
Work			
If English is not	your first language, please state wha	at is <i>(this may include British Sign Language)</i> :	
Do you need a t	translator/signer?	Yes/No (Please delete as applicable)	
Place of Work			
arent/Contact			
Surname			
Forename			
Gender: Male/F	emale <i>Please delete as applicable</i>		
Title (e.g. Mr, Mrs	s, Miss, Ms, Rev. etc)		
Relationship to o	child <i>(See list under 'Your Details')</i>		
	n have 'Parental Responsibility'? order relating to this child?	Yes/No (Please delete as applicable) Yes/No (Please delete as applicable)	

Address (If different from address given for child)	
Contact Information Telephone Number(s) (with STD numbers, where	Please tick if this is a Notes
appropriate)	Please tick if this is a Notes daytime number
Home	
Work	
Mobile	
Other	
Email Address	
Home	
Work	
If English is not your first language, please state wha	at is <i>(this may include British Sign Language)</i> :
	· · · · · · · · · · · · · · · · · · ·
Do you need a translator/signer?	Yes/No (Please delete as applicable)
Place of Work	
rent/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? Contact priority (1 - 5)	Yes/No (Please delete as applicable) Yes/No (Please delete as applicable)
Address (If different from address given for child)	
Contact Information Telephone Number(s) (with STD numbers, where appropriat <u>e</u>)	Please tick if this is a Notes
Home	
Work	
Mobile	
Other	
Email Address	_
Home	

If English is not your first language, please state what i	s (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? Contact priority (1 - 5) Address (If different from address given for child)	Yes/No (Please delete as applicable) Yes/No (Please delete as applicable)
Contact Information Telephone Number(s) (with STD numbers, where	Please tick if this is a Notes
appropriate) Home	daytime number
Work	
Mobile	
Other	
Email Address Home	
Work	
If English is not your first language, please state what is	s (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 exclusio

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 that 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.

S11/3 Data Collection on Admission to School: Disability Devon

Name of child these are the Disability details for:	County Council /
UPN (for School's Use - Optional)	
Schools are committed to making sure that school is a happy and successful experience for all people. Where a child has a particular difficulty or need, the school will do its best to put me	
overcome this. It would therefore be helpful if you would complete the information below.	asures in place to
Please indicate whether your child has any long-standing illnesses*, health problems or disabil	
have substantial difficulties with any of the areas of his/her life shown below? Please tick <u>all</u>	nat apply.
*By long-standing we mean anything that has troubled them over a period of at least 12 months	ths or that is likely to
affect them over at least 12 months. Please exclude difficulties that you would expect for a ch	
If you would rather discuss this issue with a member of staff than complete this form, please le	et 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.