

LITTLE OWLS PRE-SCHOOL ADMISSION FORM



This data is being collected for the purpose of essential school information to comply with legal requirements and is in accordance with the Data Protection Act 1998.

Please print in the areas below

Please provide as much information as possible about your child.	
Legal Surname: _____	Legal Forename: _____
Gender (M/F): _____	Date of Birth: _____
Middle Name(s): _____	
Preferred Surname: _____	Preferred Forename: _____
Postcode: _____	Home telephone number: _____
Home Address: _____	

Please give details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Priorities them in the order that you wish for them to be contacted in an emergency.

<u>Contact Information:</u>	
<u>Parent/Guardian</u>	
Title and Surname: _____	Forename: _____
Daytime Tel. No: _____	Day Place: _____
Home Phone: _____	Mobile: _____
E-mail: _____	Daytime Fax: _____
Address (if different to above): _____	

Postcode: _____	
Relationship to Pupil: _____	
Parental Responsibility: Yes/No	
	Priority <input type="checkbox"/>
	Currently serving in Regular HM Forces Military units? <input type="checkbox"/>

<u>Contact Information:</u>	
<u>Parent/Guardian</u>	
Title and Surname: _____	Forename: _____
Daytime Tel. No: _____	Day Place: _____
Home Phone: _____	Mobile: _____
E-mail: _____	Daytime Fax: _____
Address (if different to above): _____	

Postcode: _____	
Relationship to Pupil: _____	
Parental Responsibility: Yes/No	
	Priority <input type="checkbox"/>
	Currently serving in Regular HM Forces Military units? <input type="checkbox"/>

PUPIL'S ADMISSION FORM

<u>Contact Information:</u>	<u>Non-Parental Contact</u>
Title and Surname: _____	Forename: _____
Daytime Tel. No: _____	Day Place: _____
Home Phone: _____	Mobile: _____
E-mail: _____	Daytime Fax: _____
Address: _____	

Postcode: _____	
Relationship to Pupil: _____	

Priority

<u>Contact Information:</u>	<u>Non-Parental Contact</u>
Title and Surname: _____	Forename: _____
Daytime Tel. No: _____	Day Place: _____
Home Phone: _____	Mobile: _____
E-mail: _____	Daytime Fax: _____
Address: _____	

Postcode: _____	
Relationship to Pupil: _____	

Priority

Medical Information:

Medical Practice Name: _____

Medical Practice Address: _____

_____ Tel no: _____

Does your child have any medical conditions that the school should be aware of?

Does your child receive any Paramedical Support?

Occupational Therapy Physiotherapy

Speech Therapy Other support please specify

PUPIL'S ADMISSION FORM

Ethnicity:

White

- British
- Irish
- Traveller of Irish Heritage
- Gypsy/Roma
- Any other White background

Mixed

- White & Black Caribbean
- White & Black African
- White & Asian
- Any other mixed background

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

Black or Black British

- Caribbean
- African
- Any other Black background

Chinese

Any other ethnic background

I do not wish an ethnic background category to be recorded

This information was provided by

Parent

First Language:

A **First Language** other than English should be recorded where a child was exposed to the language during early development and continues to be exposed to this language in the home or in the community.

If a child was exposed to more than one language (which may include English) during early development the language other than English should be recorded, irrespective of the child's proficiency in English.

First Language: _____

Other Languages Spoken: (in order of importance)

1. _____

2. _____

Religion:

Buddhist

Jewish

Hindu

Christian

Muslim

Sikh

No religion

Other religion

PUPIL'S ADMISSION FORM

Additional Information:

Days/Sessions Required:

	Morning	Afternoon
Monday	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>

Parent/Guardian Name (Please print) : _____

Parent/Guardian Signature: _____

Date: _____

PUPIL'S ADMISSION FORM

<p>Parent's Consent for Web Publication of Work and Photographs I agree that my son/daughter's work may be electronically published. I also agree that appropriate images and video that include my son/daughter may be published subject to the school rule that photographs will not be accompanied by pupil names.</p>	YES/NO
<p>Parent's Consent for Internet Access I have read and understood the school e-safety rules and give permission for my son/daughter to access the Internet. I understand that the school will take all reasonable precautions to ensure that pupils cannot access inappropriate materials but I appreciate that this is a difficult task. I understand that the school cannot be held responsible for the content of materials accessed through the Internet. I agree that the Pre-School at Fearon Hall is not liable for any damages arising from use of the Internet facilities.</p>	YES/NO
<p>Photograph Permission Occasionally we like to use photographs of children in displays, prospectus or on the website. I give permission for Pre-School at Fearon Hall to use a photograph of my child in displays, prospectus or on the school website.</p>	YES/NO
<p>Local Studies & Visits to Rendell Primary School It is sometimes necessary for children to leave the school site to study the local area as part of their History or Geography National Curriculum work. The teacher will always accompany the class with at least one other adult supporting him/her. As this only takes place in the immediate vicinity of the school, and can be quite frequent at certain times of the year, we ask parents to give permission which will cover the child's time at the Pre-School at Fearon Hall. I give permission for my child to take part in local trips, which will involve him/her leaving the Pre-School at Fearon Hall site to work on projects in the local area.</p>	YES/NO
Child's Name:	Class:
Signed (Parent/Guardian):	Date:
Please print name:	
Email address:	
Please sign and return to the school office	