

St. Julian's Primary School

Pupil Data Collection Form



Child's Details					
Legal Forename			Middle Name(s)		
Legal Surname			Preferred Name		
Date of Birth			Gender		
Address					
House Name/Number & Street					
Town					
City					
Post Code					
Phone Number	Home			Phone Number	Mobile
Primary Contact's Details					
Title			Forename		
			Surname		
Relation to child:					
Does this person have legal parental responsibility (<i>please tick</i>)				Yes []	No []
Address					
House Name/Number & Street					
Town					
City					
Post Code					
Phone Number	Home			Phone Number	Mobile
Phone Number	Work			Phone Number	Other
Email Address	Home				
Occupation	Optional			Work Address	Optional
Secondary Contact's Details					
Title			Forename		
			Surname		
Relation to child:					
Does this person have legal parental responsibility (<i>please tick</i>)				Yes []	No []
Address					
House Name/Number & Street					
Town					
City					
Post Code					
Phone Number	Home			Phone Number	Mobile
Phone Number	Work			Phone Number	Other
Email Address	Home				
Occupation	Optional			Work Address	Optional

Third Contact's Details

Title		Forename		Surname	
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Relation to child:	
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Does this person have legal parental responsibility (<i>please tick</i>)	Yes []	No []
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Address

House Name/Number & Street	
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Town	
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City	
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Post Code	
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Phone Number	Home		Phone Number	Mobile	
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Phone Number	Work		Phone Number	Other	
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Email Address	Home	
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Fourth Contact's Details (Optional)

Title		Forename		Surname	
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Relation to child:	
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Does this person have legal parental responsibility (<i>please tick</i>)	Yes []	No []
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Address

House Name/Number & Street	
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Town	
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City	
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Post Code	
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Phone Number	Home		Phone Number	Mobile	
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Phone Number	Work		Phone Number	Other	
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Email Address	Home	
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Family Links at the school

Please list the names of any children to whom your child is related at the school, along with their relationship
Eg. Joe Bloggs – Brother, Josh Davies – Step Brother, Jane Bloggs – Cousin

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please continue on a blank page if appropriate

Child's School History (Leave blank if no previous school attended)

Name of Previous School	
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Address	
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Date of last day	
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Reason for leaving	
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Collection/Parenting Arrangements

It is school policy for all pupils to be collected by an adult at the end of the day. If someone other than the contacts listed above will be collecting the child on a regular basis (*for example a child minder or other friend or relative*), please inform us of these arrangements here. If parents are separated and there is a Parenting Plan, Court Order or any other custody arrangements in place, please inform us here. We may need you to provide us with a copy of any relevant legal documentation. (*Leave blank if not applicable*)

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Dietary / Medical

Is your child currently in receipt of Free School Meals? <i>(please tick)</i>	Yes []	No []
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Please tick any dietary needs your child has:

Artificial Colouring Allergy	<input type="checkbox"/>	Gluten Free	<input type="checkbox"/>	Halal	<input type="checkbox"/>
Kosher Foods Only	<input type="checkbox"/>	No Dairy produce	<input type="checkbox"/>	Nut Allergy	<input type="checkbox"/>
No Pork	<input type="checkbox"/>	Sea Food Allergy	<input type="checkbox"/>	Vegetarian	<input type="checkbox"/>
Other (Please give details)					

Medical Practice Details

Name of Doctor <i>(if applicable)</i>	
Name of Practice	
Address	
Post Code	
Telephone Number	

Does your child have any of the following? *(Please tick if applicable)*

Allergies	<input type="checkbox"/>	Asthma	<input type="checkbox"/>	Eczema	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Other	<input type="checkbox"/>

Details *(including any medication your child is currently taking)*

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Agencies / Additional Needs

Are any of the following agencies involved with your child/family	Still Involved	Previously Involved	Please provide details
Health Visitor	<input type="checkbox"/>	<input type="checkbox"/>	
Clinic/School Doctor	<input type="checkbox"/>	<input type="checkbox"/>	
Audiologist	<input type="checkbox"/>	<input type="checkbox"/>	
Hearing Impaired Service	<input type="checkbox"/>	<input type="checkbox"/>	
Optician/Ophthalmologist	<input type="checkbox"/>	<input type="checkbox"/>	
Visual Impaired Service	<input type="checkbox"/>	<input type="checkbox"/>	
Occupational Therapist	<input type="checkbox"/>	<input type="checkbox"/>	
Paediatrician	<input type="checkbox"/>	<input type="checkbox"/>	
Child Psychologist	<input type="checkbox"/>	<input type="checkbox"/>	
Educational Psychologist	<input type="checkbox"/>	<input type="checkbox"/>	
Social Worker	<input type="checkbox"/>	<input type="checkbox"/>	
Home Advisor/Families First	<input type="checkbox"/>	<input type="checkbox"/>	
Voluntary Worker	<input type="checkbox"/>	<input type="checkbox"/>	

Are there any other health or behaviour concerns we should be aware of (*please provide details*)

Consent

Consent for Local Educational Visits

Occasionally, we may take pupils offsite for educational visits in the local area, within walking distance from the school.
Eg. to walk to the local park to study trees or wildlife, or to visit to the church or post office down the road, or visit St. Julian's Comprehensive School etc.

We will always inform parents via text message when such visits are taking place.

Please sign in the box if you give consent for your child to take part in local educational visits within walking distance. Where school trips require transport, we will always inform parents/carers via letter and require additional consent.

Please see the **Educational Visits Policy** for more information.

Parent/Carer Signature:

Food Tasting Consent

Occasionally, pupils may be given the opportunity to taste a variety of different foods within some thematic lessons.

Eg. Food relating to particular country they are learning about, or healthy foods and fruit and vegetables.

Please sign in the box if you give consent for your child to taste a variety of foods. We will always refer to the allergies/dietary information on this form before allowing pupils to taste any foods.

Parent/Carer Signature:

Information Privacy

To meet the requirements of the Data Protection Act 1998 and the General Data Protection Regulations, schools are required to issue a Privacy Notice to children and young people and/or parents and guardians summarising the information held on record about children and young people, why it is held, and the third parties to whom it may be passed.

This Privacy Notice provides information about the collection and processing of children's or young people's personal and performance information by the Welsh Government, Newport City Council (LA), the Education Achievement Service for South East Wales (EAS) and St. Julian's Primary School.

You can view our privacy notice on our website or ask the office staff to print a copy for you.

Photographs & Social Media

The use of digital images plays an important part in our learning activities. We may take photographs/videos of pupils...

- to monitor and record evidence of progress
- to put on displays around the classroom/school
- to share on Class Dojo story timeline for parents to see what we've been doing
- to record school concerts and performances for DVDs
- to share on our school social media accounts, website and in newsletters.

For more information, please see our 'Use of Images Policy'.

Please inform the head teacher if you do not want your child to be photographed/filmed.

Ethnic/Cultural Information

Ethnicity

White – British		White – Irish		White – any other White background		Arab	
Asian or Asian British – Indian		Asian or Asian British – Pakistani		Asian or Asian British – Bangladeshi		Asian or Asian British – any other Asian background	
Black or Black British – Caribbean		Black or Black British – African		Black or Black British – any other Black background		Chinese	
Mixed – White and Black Caribbean		Mixed – White and Black African		Mixed – White and Asian		Mixed – Any other mixed background	
Any other ethnic origin group (<i>please state</i>)							

Religion

No Religion		Christian		Jehovah's Witness		Buddhist	
Hindu		Jewish		Muslim		Sikh	
Any other religion (<i>please state</i>)							

Language

What is your child's first language?			
What language does your child mainly use at home?			
Can your child speak Welsh? (<i>please tick</i>)	Can speak Welsh fluently []	Can speak some Welsh, but not fluently []	
	Can't speak any Welsh []		