# Data Collection Sheet

# Please ensure that all relevant boxes are completed. Please provide us with a minimum of two people and their contact details for emergencies. Thank you.

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| --- | --- | --- | --- | --- | --- | --- |
| **Child’s Legal Surname:** |  | | | **Child’s Surname:**  **(*if different*)** |  | |
| **Forename:** |  | | | **Middle name:** |  | |
| **Chosen name:**  **(*If different*)** |  | | | **Gender:** |  | |
| **Date of Birth:** |  |  |  | **Class:** |  |
| **Home Address:** |  | | | | | |
| **Post Code:** |  | | **Home Telephone:** | | |

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| **Please give details of all persons who have parental responsibility** and anyone else you wish to be contacted in an emergency.  (Place them in the order that you wish for them to be contacted in an emergency.) ***Please give a minimum of 2 contacts****.* | | | |
| **Priority ?**  **Please circle** | **Name/Relationship to child** | **Home Address/Phone/Mobile** | **Work Address & Phone**  **(Including department or extension if applicable)** |
| **1**  **Or**  **2** | **MOTHER / GUARDIAN**  **Full Name:**  **Parental responsibility**:  Yes / No | **Home Address:**  **Tel:**  **Mobile:**  **Email:** | **Work Address:**    **Work Tel:** |
|  | | | |
| **1**  **Or**  **2** | **FATHER / GUARDIAN**  **Full Name:**  **Parental responsibility:**  Yes /No | **Home Address:**  **Tel:**  **Mobile:**  **Email:** | **Work Address:**    **Work Tel:** |
|  | | | |
| **3** | **Full Name:**  **Relationship with child**: | **Home Address:**  **Tel:**  **Mobile:**  **Email:** | **Work Address:**    **Work Tel:** |
|  | | | |
| **4** | **Full Name:**  **Relationship with child:** | **Home Address:**  **Tel:**  **Mobile:**  **Email:** | **Work Address:**    **Work Tel:** |

|  |  |
| --- | --- |
| **GP Name and Surgery** |  |
|  |  |
| **Address:** |  |
| **Telephone Number:** |  |

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| **Medical Conditions**: |
|  |
| **Disabilities:** |
|  |
| **Dietary Requirements:** |
|  |

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| --- | --- | --- | --- | --- |
| **Ethnicity:** |  | **Religion:** | |  |
| **Home Language:** |  | **Child First Language:** | |  |
| **Mother First Language** |  | **Father First Language** | |  |
| **Forces Family** | Yes / No | **NHS Number** | |  |
| **GDPR Act 2018:** The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority and with the DfE. | | | | |
| **Signature:** | | | **Date:** | |