



Hoylandswaine Primary School

INFORMATION COLLECTION SHEET

| | | | |
|---------------------------------------------|--|---------------|------------|
| Child's name | | Date of Birth | |
| Name to be known as for books/coat peg etc. | | | |
| | | | |
| Home Address | | | Post Code: |
| Previous school / Nursery if applicable: | | | |

Details of Parents/Guardians

| | | | |
|-----------------------|----------------|------------|--|
| Parent 1 | | | |
| Full Name | Priority* | | |
| Home Address | | Post Code: | |
| Home telephone: | Mobile: | | |
| Day / Work Telephone: | Email Address: | | |
| Parent 2 | | | |
| Full Name | Priority* | | |
| Home Address | | Post Code: | |
| Home telephone: | Mobile: | | |
| Day / Work Telephone: | Email Address: | | |

* Note – the priority order someone should be contacted in the case of an emergency in school (i.e. 1st, 2nd, 3rd etc.)

The school runs a text message service. The Priority #1 contact will receive relevant messages in the event of an emergency or school closure.

Please tick the box to confirm you wish to receive text messages.

Online payment system: your information will be stored on Schoolmoney.co.uk, please tick the box to authorise your consent

NB: Both the text service and online payments systems used are fully regulated under the General Data Protection Regulations 2018

Emergency contact numbers alternative to parents/guardian

| | | | |
|---------------------------------------------------|---------|-----------------------|--|
| Emergency Contact 1 Relationship to child: | | | |
| Full Name | | Priority* | |
| Home Address: | | Post Code: | |
| Home telephone: | Mobile: | Day / Work Telephone: | |
| Emergency Contact 2 Relationship to child: | | | |
| Full Name | | Priority* | |
| Home Address: | | Post Code: | |
| Home telephone: | Mobile: | Day / Work Telephone: | |
| Emergency Contact 3 Relationship to child: | | | |
| Full Name | | Priority* | |
| Home Address: | | Post Code: | |
| Home telephone: | Mobile: | Day / Work Telephone: | |

Hoylandswaine Primary School - Information Collection form continued

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|-------------------------------------|--|
| Do any of the following apply? Please attach a copy of legal document(s) if applicable | | | | | |
| <i>Please tick as appropriate (✓)</i> | | | | | |
| Adoption | | Court Order | | Residency Order | |
| Special Guardianship | | Any other Restrictions (please provide details) | | | |
| Details of any other Restrictions: | | | | | |
| Please state to whom correspondence should be addressed: | | | | | |
| Medical conditions: Does your child have a medical condition? YES / NO <i>(please delete as appropriate)</i> If yes please complete the separate Medical Information Form | | | | | |
| Ethnicity | | | | | |
| Country of birth: | | Nationality: | | 1 st Language: | |
| <i>Please tick as appropriate (✓)</i> | | | | | |
| White British | | White Irish | | Other white background | |
| M – White & Black African | | M – White & Asian | | M – any other | |
| AAB - Bangladeshi | | AAB – Indian | | AAB – any other | |
| BBB – African | | BBB – any other | | Chinese | |
| Other ethnicity | | I do not want an ethnic background to be recorded | | | |
| M = Mixed | | AAB = Asian or Asian British | | BBB = Black or Black British | |
| Sibling Information | | | | | |
| Name | | DoB | | School | |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| Contact between home and school | | | | | |
| As some of you may be aware the government have changed the way we deal with your personal data (General Data Protection Regulations) this be effective from May 25 th 2018. | | | | | |
| This will impact on some of the ways we send information home e.g. school reports, letters etc. We will no longer be able to send these home with your child without your permission. It is important, therefore, that you indicate your preference below and sign at the end of this form. | | | | | |
| I agree to school giving my child information to bring home <input type="checkbox"/> | | | | | |
| I will collect my information from the school office <input type="checkbox"/> | | | | | |
| Safeguarding | | | | | |
| <i>I/We consent to the school (through the head as the person responsible) obtaining, using, holding and disclosing 'Personal data' including "sensitive personal data" (such as medical information), for the purposes of safeguarding and promoting the welfare of our child, and where necessary, for the legitimate interests of the School and ensuring that all relevant legal obligations of the school and ourselves are complied with. I/We give my/our consent to such processing and disclosure provided that at all times any processing or disclosure of personal data or sensitive personal data is done lawfully and fairly in accordance with the General Data Protection Regulations 2018.</i> | | | | | |
| Signature: _____ Date: _____ | | | | | |