



## Longton Lane CPS Pupil Data Collection Form

This form should be completed by parents, those who have parental responsibility or day to day care of the child. Please keep the school office informed of any changes to this information such as new mobile telephone numbers, changes of address, etc.

### PUPIL INFORMATION

<b>Legal Surname</b>		<b>Legal Forename</b>	
<b>Preferred Surname</b>		<b>Preferred Forename</b>	
<b>Middle Name (s)</b>		<b>First Language</b>	
<b>Date of Birth</b>		<b>Sex at Birth</b>	Male / Female
<b>Country of Birth</b>		<b>Nationality</b>	
<b>Home address, including postcode (where child normally resides)</b>		<b>Names of siblings, (including stepsiblings), currently attending school</b>	
<b>Doctor's name and address</b>		<b>Telephone number of doctor's surgery</b>	
<b>Medical conditions</b>		<b>Allergies</b>	
<b>Lunch meal type (please circle one only)</b>	School Meal (paid) Free School Meal Packed Lunch	<b>Special dietary requirements</b>	
<b>Is your child currently looked after by a local authority?</b>	Yes / No	<b>If yes, please state local authority</b>	
<b>Has your child ever been looked after by a local authority?</b>	Yes / No	<b>If yes, please state previous local authority</b>	
<b>Is your child fostered?</b>	Yes / No	<b>Is your child adopted?</b>	Yes / No
<b>Social Care / other agency information</b>		<b>Any Special Educational Needs? Does your child have a EHCP in place?</b>	
<b>Are either of your child's parents in the armed forces?</b>	Yes / No	<b>Any other welfare / family information you wish school to know about</b>	
<b>Is English the child's first language?</b>	Yes / No	<b>If no, please indicate language spoken</b>	
<b>Ethnicity</b>	White British / White Irish / White Gypsy / White Other / White & Black Caribbean / White & Black African / White & Asian / Other Mixed / Indian / Pakistani / Bangladeshi / Other Asian / Black Caribbean / Black African / Other Black / Chinese / Other Ethnic / Prefer not to say		
<b>Religion</b>	Buddhist / Christian / Hindu / Jewish / Muslim / No Religion / Other Religion / Sikh / Prefer not to say		
<b>Usual mode of transport</b>	Bus / Car Share / Car or Van / Cycle / Other / Taxi / Train		
<b>Information provided by parent</b>	Yes / No (please circle)		



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### PARENT INFORMATION: MOTHER (Please underline the main contact telephone number)

<b>Surname</b>		<b>Forename</b>	
<b>Home address, including postcode</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Does this person have parental responsibility?</b>	Yes / No	<b>Is this person an emergency contact?</b>	Yes / No
<b>Telephone numbers</b>	Home:	Mobile:	Work:
<b>Email address</b>			
<b>Occupation</b>		<b>Place of Work</b>	
<b>Information provided by parent</b>	Yes / No (please circle)		

### PARENT INFORMATION: FATHER (Please underline the main contact telephone number)

<b>Surname</b>		<b>Forename</b>	
<b>Home address, including postcode</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Does this person have parental responsibility?</b>	Yes / No	<b>Is this person an emergency contact?</b>	Yes / No
<b>Telephone numbers</b>	Home:	Mobile:	Work:
<b>Email address</b>			
<b>Occupation</b>		<b>Place of Work</b>	
<b>Information provided by parent</b>	Yes / No (please circle)		

If there are any other persons who have parental responsibility or can be deemed a 'parent' (e.g., stepparent, or parent's partner), please provide details below. Please underline the main contact telephone number. Continue on a separate sheet if necessary (i.e., more than one additional person with parental responsibility, etc.).

<b>Surname</b>		<b>Forename</b>	
<b>Home address, including postcode</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Does this person have parental responsibility?</b>	Yes / No	<b>Is this person an emergency contact?</b>	Yes / No
<b>Relationship to child</b>			
<b>Telephone numbers</b>	Home:	Mobile:	Work:
<b>Email address</b>			
<b>Occupation</b>		<b>Place of Work</b>	
<b>Information provided by parent</b>	Yes / No (please circle)		



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### OTHER EMERGENCY CONTACTS – IN PRIORITY ORDER

Please provide below the names of any other people who can be contacted by school in an emergency (these may be family members, not identified overleaf, or friends). Please underline the main contact numbers.

<b>1) Surname</b>		<b>Forename</b>	
<b>Relationship to child</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Telephone numbers</b>	Home:	Mobile:	Work:
<b>2) Surname</b>		<b>Forename</b>	
<b>Relationship to child</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Telephone numbers</b>	Home:	Mobile:	Work:
<b>3) Surname</b>		<b>Forename</b>	
<b>Relationship to child</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Telephone numbers</b>	Home:	Mobile:	Work:
<b>4) Surname</b>		<b>Forename</b>	
<b>Relationship to child</b>		<b>Can this person collect the child from school?</b>	Yes / No
<b>Telephone numbers</b>	Home:	Mobile:	Work:

The data being collected, controlled, and processed is in line with current Data Protection legislation. Please sign to confirm that the information given is correct and that persons named on the form have consented to Longton Lane Community Primary School holding their personal information in either electronic or hard copy format.

<b>Name of Person Completing Form:</b>	
<b>Relationship to Child:</b>	
<b>Signature:</b>	
<b>Date:</b>	

<b>School Office Use:</b>	
<b>Birth Certificate Seen?</b>	Yes / No (please circle)
<b>Birth Certificate Seen By:</b>	