

## ADMISSION FORM

Please show child's Birth Certificate to the school office

Office use: Birth Certificate checked yes / no signed \_\_\_\_\_ date seen \_\_\_\_\_

### CHILD'S DETAILS

First Names \_\_\_\_\_

Surname \_\_\_\_\_

Preferred Name (known as) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male /  
Female

Address \_\_\_\_\_

—

\_\_\_\_\_ Post

Code \_\_\_\_\_

### FAMILY INFORMATION

#### MOTHER

Name &  
Title \_\_\_\_\_

Address (if different from child)

—

\_\_\_\_\_ Post Code \_\_\_\_\_

Mobile  
Number \_\_\_\_\_

Home  
Number \_\_\_\_\_

Work  
Number \_\_\_\_\_

Email  
Address \_\_\_\_\_

Do you have parental responsibility? YES / NO

#### FATHER

Name &  
Title \_\_\_\_\_

Address (if different from child)

—

\_\_\_\_\_ Post

Code \_\_\_\_\_

Mobile  
Number \_\_\_\_\_

Home  
Number \_\_\_\_\_

Work  
Number \_\_\_\_\_

Email  
Address \_\_\_\_\_

Do you have parental responsibility? YES / NO

Please confirm who should be priority for first  
contact \_\_\_\_\_

Does anyone in your household have a disability or long term illness? YES / NO

#### ANY OTHER RELEVANT INFORMATION REGARDING FAMILY STATUS

(eg. single parent family, foster parents, ward of court orders  
et.) \_\_\_\_\_

—

#### OTHER PEOPLE WHO HAVE PARENTAL RESPONSIBILITY FOR THE CHILD

Name & Title \_\_\_\_\_ Relationship to  
Child \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_ Telephone  
Number \_\_\_\_\_

**OTHER PERSON WHO CAN BE CONTACTED IF PARENTS ARE UNAVAILABLE OR CHILD NEEDS TO BE COLLECTED FROM SCHOOL DUE TO ILL HEALTH ETC.**

Name & Title \_\_\_\_\_ Relationship to  
Child \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Post Code \_\_\_\_\_ Telephone  
Number \_\_\_\_\_

**MEDICAL INFORMATION**

Family doctor \_\_\_\_\_ Telephone  
Number \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

PLEASE GIVE DETAILS OF THE FOLLOWING (continue on separate sheet if necessary)

Speech or Hearing  
Difficulties \_\_\_\_\_

Sight  
Problems \_\_\_\_\_

Asthma, Eczema or  
Allergies \_\_\_\_\_

Any other medical history of which we need to be  
aware \_\_\_\_\_

\_\_\_\_\_

**FURTHER INFORMATION**

Will your child require school meals ? YES / NO May they be entitled to free school meals ? YES / NO (contact office for information)

Any dietary  
requirements \_\_\_\_\_

How will you child travel to school ? (please circle ONE only - the one you will do most)

Bicycle      Train      Car/Van      Walk      Taxi      School Bus      Public Bus      Car Share

Any other information you may consider  
relevant \_\_\_\_\_

**PLEASE NOTE - We are asked to collect the following information for Assessment Data Collection purposes. At Brookhurst we value different languages and cultural backgrounds. We wish to celebrate diversity in our school.**

Child's Religion \_\_\_\_\_ First/Home Language \_\_\_\_\_

Further Languages Spoken or Exposed to in the Home Environment \_\_\_\_\_

**SCHOOLS PREVIOUSLY ATTENDED** (including nursery and playgroup)

Present School \_\_\_\_\_ From \_\_\_\_\_  
Date \_\_\_\_\_

Address \_\_\_\_\_  
—  
\_\_\_\_\_

Post Code \_\_\_\_\_ Telephone \_\_\_\_\_  
Number \_\_\_\_\_

Previous School \_\_\_\_\_ From \_\_\_\_\_  
Until \_\_\_\_\_

Address \_\_\_\_\_  
—  
\_\_\_\_\_

Anticipated date of entry into Brookhurst \_\_\_\_\_ Year Group \_\_\_\_\_  
Required \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



Brookhurst Primary School  
Ullswater Avenue  
Leamington Spa  
CV32 6NH  
Tel:01926 420051

A place to think and grow

[www.brookhurstprimary.com](http://www.brookhurstprimary.com)   [admin2330@welearn365.com](mailto:admin2330@welearn365.com)   [head2330@welearn365.com](mailto:head2330@welearn365.com)

Dear Parents and Carers,

Our School processes personal data about its pupils and is a "data controller" in respect of this for the purposes of the Data Protection Act 1998. It processes this data to:

- support its pupils' teaching and learning; monitor and report on their progress; provide appropriate pastoral care, and assess how well the school as a whole is doing.

This data includes contact details, national curriculum assessment results, attendance information, characteristics such as ethnic group, special educational needs and any relevant medical information.

This data may only be used or passed on for specific purposes allowed by law. From time to time the school is required to pass on some of this data to Local Authorities, the Department for Children, Schools and Families (DCSF), and to agencies that are prescribed by law, such as the Qualifications and Curriculum Authority (QCA), Ofsted, the Learning and Skills Council (LSC), the Department of Health (DH), Primary Care Trusts (PCT), ContactPoint and other organisations that require access to data in the Learner Registration System as part of the MIAP (Managing Information Across Partners) programme and Connexions.

All these agencies are data controllers in respect of the data they receive, and are subject to the same legal constraints in how they deal with the data.

Pupils, as data subjects, have certain rights under the Data Protection Act, including a general right to be given access to personal data held about them by any data controller. The presumption is that by the age of 12 a child has sufficient maturity to understand their rights and to make an access request themselves if they wish. A parent would normally be expected to make a request on a child's behalf if the child is younger. If you wish to access your personal data, or that of your child, you will need to apply in writing to the school.

Further advice about Data Protection and access to your personal information can be found on the Information Commissioners website at:

<http://www.ico.org.uk> or via their Help line number 0303 123 1113

Yours faithfully

Angela Stanton  
Headteacher



## DATA COLLECTION FORM

Pupil's Name \_\_\_\_\_

*Our ethnic background describes how we think of ourselves. This may be based on many things, including for example, our skin colour, language, culture, ancestry or family history. **Ethnic background is not the same as nationality or country of birth.***

The Information Commissioner (formerly the Data Protection Registrar) recommends that young people aged over 11 years old have the opportunity to decide their own ethnic identity. Parents or those with parental responsibility are asked to support or advise those children aged over 11 in making this decision, wherever necessary. Pupils aged 16 or over can make this decision for themselves:

Please study the list below and tick one box only to indicate the ethnic background of the child named above. Please also tick whether the form was filled in by a parent or the pupil.

### WHITE

- |   |                          |
|---|--------------------------|
| British   | <input type="checkbox"/> |
| Irish   | <input type="checkbox"/> |
| Traveller of Irish heritage                     | <input type="checkbox"/> |
| Gypsy/Roma                                      | <input type="checkbox"/> |
| Any Other White Background (please state) _____ |                          |

**MIXED**

- White and Black Caribbean
- White and Black African
- White and Asian
- Any Other Mixed Background (please state)\_\_\_\_\_

**ASIAN OR ASIAN BRITISH**

- Indian
- Pakistani
- Bangladeshi
- Any Other Asian Background (please state)\_\_\_\_\_

**BLACK OR BLACK BRITISH**

- Caribbean
- African
- Any Other Black Background (please state)\_\_\_\_\_

**CHINESE**

**ANY OTHER ETHNIC BACKGROUND** (please state)\_\_\_\_\_

I do not wish my ethnic background category to be recorded

National Identity: British  English  Irish  Scottish  Welsh  Other

I do not wish my national identity to be recorded

This information was provided by Parent  Child (must be 11yrs or older)

(Any information you provide will be used solely to compile statistics on the school careers and experiences of pupils from different ethnic backgrounds, to help ensure that all pupils have the opportunity to fulfil their potential. These statistics will not allow individual pupils to be identified. From time to time the information will be passed on to the Local Education Authority and the Department for Education and Skills (DfES) to contribute to local and national statistics. The information will also be passed on to future schools, to save it having to be asked for again).



**Children who are learners of English as an Additional Language only**

**If your child is bilingual please fill in the additional questions below**(the term 'bilingual' refers to pupils who have regular access to more than one language, even if their first language is English).

What is your child's country of birth? If not the UK, please state your date of arrival to England.

Has your child been exposed to spoken English since birth?

For approximately how long has your child been learning English? (in months)

At home, does your child prefer to speak in English, in their first language, or a mixture of both?

If your child has attended pre-school in this country, was s/he able to converse to peers/adults in English?

If your child attended school in another country, was learning English part of the curriculum?

Please give this form to the School Office.

Thank you.