



FOR OFFICE USE	
ADMISSION NO.	DFES NO.
U L N NUMBER	
U P N NUMBER	
YEAR	FORM

## ADMISSION FORM

### PUPIL DETAILS

SURNAME	FORENAMES	MIDDLE NAME	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
ADDRESS		DATE OF BIRTH / /	TELEPHONE NO.	
			POSTCODE	

### DETAILS OF LAST SCHOOL

NAME OF SCHOOL	NUMBER OF TERMS AT THAT SCHOOL
ADDRESS	TELEPHONE NO.

### PERSONS WITH PARENTAL RESPONSIBILITY

**\* Legal Definition of Parental Responsibility (PR) The following people have PR:**  
 1. Natural Mothers 2. Natural Fathers IF: he was married to the mother when the child was born OR registered the birth of the child with the mother OR has a PR agreement with the mother OR by court order.  
 3. Both if they jointly adopt a child 4. A step-parent by agreement of those parents who have Parental Responsibility for the child: OR by order of the court. 5. Where the court makes a Residence Order 6. Local Authorities will be given parental responsibility if the child is under a care order (LAC).

#### \*\* Email Address/Mobile Phone No:

To facilitate contacting parents we require a correct mobile phone number and email address. These will be the email addresses/mobile phone numbers of those persons shown below who have parental responsibility.

SURNAME	FORENAMES	TITLE
ADDRESS		POSTCODE
		TEL NUMBER WORK TEL NUMBER
EMAIL (primary home email address **)		MOBILE (Used as primary contact number and school text messaging service**)
RELATIONSHIP TO CHILD	HAS PARENTAL RESPONSIBILITY ? YES <input type="checkbox"/> NO <input type="checkbox"/> (Check above *)	Note : The school may request confirmation/evidence of Parental Responsibility.

SURNAME	FORENAMES	
ADDRESS		POSTCODE
		TEL NUMBER WORK TEL NUMBER
EMAIL (primary home email address **)		MOBILE (Used as primary contact number and school text messaging service**)
RELATIONSHIP TO CHILD	HAS PARENTAL RESPONSIBILITY ? YES <input type="checkbox"/> NO <input type="checkbox"/> (Check above *)	IS THERE A COURT ORDER HELD IN RELATION TO THIS YOUNG PERSON ? YES <input type="checkbox"/> NO <input type="checkbox"/>

### PERSONS WITH ACTUAL CUSTODY - IF DIFFERENT FROM ABOVE

Note : The school may request confirmation/evidence of Parental Responsibility.

SURNAME	FORENAMES	
ADDRESS		EMAIL
		LOOKED AFTER CHILD ? YES <input type="checkbox"/> NO <input type="checkbox"/>
		AUTHORITY
POSTCODE	TEL NUMBER	MOBILE (Used as primary contact number and school text messaging service)
RELATIONSHIP TO CHILD	HAS PARENTAL RESPONSIBILITY ? YES <input type="checkbox"/> NO <input type="checkbox"/> (Check above *)	

SURNAME	FORENAMES	
ADDRESS		EMAIL
		LOOKED AFTER CHILD ? YES <input type="checkbox"/> NO <input type="checkbox"/>
		AUTHORITY
POSTCODE	TEL NUMBER	MOBILE (Used as primary contact number and school text messaging service)
RELATIONSHIP TO CHILD	HAS PARENTAL RESPONSIBILITY ? YES <input type="checkbox"/> NO <input type="checkbox"/> (Check above *)	

## EMERGENCY CONTACTS

If the nature of your occupation makes daytime contact difficult, please give the name, relationship, telephone number and location of up to three persons who may be contacted in the event of an emergency to act upon your behalf.

	CONTACT 1	CONTACT 2	CONTACT 3
NAME			
RELATIONSHIP			
LOCATION OF CONTACT			
TELEPHONE NUMBER			
MOBILE NUMBER			

**SIBLINGS :** If there is an older brother or sister in the school please give the name and year group of the oldest child.

NAME	YEAR AND FORM
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## OTHER INFORMATION

**LUNCH ARRANGEMENTS** (please note that students are not allowed off the school site)

Free school meal  School Lunch  Sandwiches at school

**TRAVEL ARRANGEMENTS**

Bicycle  Car  Rail  Taxi  Walk  Bus

FIRST LANGUAGE	ANY OTHER LANGUAGES
HOME LANGUAGE	RELIGION

Has your child studied French or German ?

French  German  Neither

Does your child have any medical condition of which the school should be made aware ?

Yes  No

If Yes please provide a brief description :

*If Yes, have you completed a specific medical form?*

Yes  No

Does your child have any disability you wish the school to be aware of ? If so please specify

Does your child have any additional needs ? If so please specify

SCHOOL ACTION

SCHOOL ACTION PLUS

STATEMENT

## PARENTAL CONSENT

There is a separate parental consent/opt in form that needs to be completed in accordance with GDPR.

This will be sent to you once a place has been offered.

All data collection and retention is subject to GDPR requirements

Is your child a Young Carer?

Yes  No

Please indicate if you would, from time to time, agree to participate in parental ballots ?

Yes  No

*From time to time, we like to ask the opinion of parents on issues which affect the school, your preference on whether you wish to take part is shown here.*

The school is registered with the Information Commissioner's Office for holding personal data. The school is required to share some of the data with the Welsh Government, the Local Authority and other government authorised bodies - please see the school's privacy notice for further information. (Data Protection Act 1998 repealed – superseded by EU Regulation E2016/679 GDPR and implemented 25 May 2018)

**PLEASE SIGN THIS FORM IN THE SPACES INDICATED - THANK YOU**

SIGNATURE OF PARENT/GUARDIAN

DATE

SIGNATURE OF PARENT/GUARDIAN

DATE