

**SCHOOL ADMISSION FORM**

Details of the child to be admitted						
Forename (as on Birth Certificate)		Middle name(s)		Legal surname		
Chosen forename (if different)		Date of Birth		Chosen surname (if different)		
If appropriate, underline the forename by which your child is known				Date of admission		
Current home address	.....			Sex	M	F
	.....					
	Postcode	.....			Year	
		Home telephone number				
<b>Details of the people who have legal parental responsibility for this child</b> <b>The Education Act 1996 defines a parent to include the natural parents of the child as well as a person (see back page for complete definition of legal responsibility)</b>						
Relationship to your child		Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's	
<b>Mother</b>						
	Home No: .....					
	Work No: .....					
	Mobile .....					
Place of Work:				Job Title:		
Relationship to your child		Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's	
<b>Father</b>						
	Home No: .....					
	Work No: .....					
	Mobile .....					
Place of Work:				Job Title:		
Relationship to your child		Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's	
<b>Step parent</b>						
	Home No: .....					
	Work No: .....					
	Mobile .....					
Place of Work:				Job Title:		

Relationship to your child	Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's
<b>Step parent</b>				
	Home No:.....			
	Work No: .....			
	Mobile .....			
E-mail .....				
Place of Work:		Job Title:		

### Additional Emergency Contacts

Relationship to your child	Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's
<b>1st contact</b>				
	Home No:.....			
	Work No: .....			
	Mobile .....			
E-mail .....				

Relationship to your child	Mr, Ms, Mrs etc	Forename	Surname	Home address, if different from your child's
<b>2<sup>nd</sup> contact</b>				
	Home No:.....			
	Work No: .....			
	Mobile .....			
E-mail .....				

### Other family details

Please give details of any other children currently living at your child's home(s).

Children's names	Date of birth	Sex: M or F	School attending

### Doctor, health care and other specific arrangements

Name of doctor's surgery	Contact details of practice/health centre
	The school has contact details of local doctors. If you are not using a local doctor, please supply the contact details separately.

Other medical information relevant to your child's development and school life e.g. hearing, sight, allergies, diabetes, epilepsy.

Does your child have a Statement of Special Education Needs (SEN)?	Yes	No
--	-----	----

**Free school meals (FSM) [ ]**

**If you are eligible for free school meals, please tick the box, even if you do not wish to claim.**

The number of pupils eligible for Free School meals is now an indicator used widely throughout the country to measure anything from funding levels to predictors of performance. It is very important that we, as a school, are credited with the correct data. Even if you do not wish to exercise your right to claim the meals, it is important that we know you are eligible.

**Travel details** Please tick the **main** method of transport used to get to and from school

School bus [ ] Public Transport [ ] Car [ ] Bicycle [ ] Walk [ ] Taxi [ ] Rail [ ]

**Contact method**

We make use of the following methods of contact where applicable and appropriate, so please ensure that you check the site regularly and keep you details up to date.

E-mail • Letter • School website • Telephone call • Text message

For the purposes of first aid calling please indicate your preferred contact:

Mother [ ] Father [ ] Step Parent [ ] Other (please indicate) .....

**Computer use** We would like to know what computer/internet access your child has at home.

Is there home access for use of a computer for homework and other school activities?  
 [ ] Yes [ ] No

Do they have access to the internet from that computer (Please indicate type of connection)  
 [ ] Broadband [ ] Dial-Up [ ] No Internet

**Ethnicity and faith**

The Department for Children, Schools and Families (DCSF) requires all schools to collect data regarding the ethnic origin of its pupils. From the categories listed below please tick the appropriate category for your child.

Please tick the box that you believe best describes your child's ethnicity:  
**I do not wish for an ethnic background to be recorded (REF) [ ]**

White - British		White and Asian	
White - Irish		White and Black African	
Bangladeshi		White and Black Caribbean	
Black - African		Any other Asian background	
Black Caribbean		Any other Black background	
Chinese		Any other ethnic group	
Gypsy/Roma		Any other mixed background	
Indian		Any other White background	
Pakistani		Traveller of Irish heritage	

**Religion**

Buddhist		Muslim	
Christian		Sikh	
Hindu		Other religion	
Jewish		No religion	

**Nationality** e.g. Serbian

### Photo and digital use

Your child maybe included in school publications or on digital media, please indicate whether you give permission by entering a cross in the checkbox and **completing the included photographic consent form**

Yes [ ] No [ ]

### Previous school history

Please could you give details of your child's previous school

**Name and address of school**

**Dates** from \_\_\_\_\_ to \_\_\_\_\_

**Data Protection Act 1998:** 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 information you have given on this form will be held by the school and Norfolk County Council Children's Services. It will be shared with other departments within Norfolk County Council in order to provide and plan services e.g. School Transport. It will be used to administer health, social and welfare care and will be shared with healthcare advisors, practitioners and other relevant agencies, for example Connexions and exam awarding bodies (currently AQA, CCEA, Edexcel, OCR and WJEC) and the Joint Council for Qualifications (JCQ). It will be forwarded to your child's new school if and when s/he changes school. It will also be used for statutory returns and for research purposes.

I note the above statement and believe the information provided in this form to be correct as of this date. I will inform the school of any changes that may occur whilst my child attends the school.

Please refer to [www.spowstonhigh.org/data](http://www.spowstonhigh.org/data) to access the schools Fair Processing Notice

## PARENTAL RESPONSIBILITY

Parental responsibility is defined by the Children's Act 1989 as "all the rights, duties, powers and responsibilities of parents in relation to a child and his/her property."

Those with parental responsibility are:

1. The mother
2. The father (if he was married to the child's mother when the child was born)
3. The father
  - a) if he was not married to the child's mother when the child was born but now has a residence order;
  - b) or he now has a court order which gives him parental responsibility ;
  - c) or he now has a formal 'Parental Responsibility Agreement' with the mother;
  - d) or he has since married the mother
4. A guardian of the child
5. Someone who holds a custody or residence order
6. A local authority which has a care order
7. Someone who holds an emergency protection order
8. Any man or woman who has adopted the child

All persons with parental responsibility must be treated equally by schools and the LEA unless court orders exist limiting an individual's exercise of their parental responsibility.

**When completed, please return this form to the school.**

<b>Signed by parent /carer/guardian:</b>	<b>Date:</b>
--	--------------

### For School Office Use

<b>Admission number</b>		<b>SIMS updated</b>	
<b>IT dept informed</b>		<b>Year and Tutor Group</b>	
<b>Correct UPN recorded</b>		<b>Entry date</b>	