ORMISTON BOLINGBROKE ACADEMY



DATA COLLECTION SHEET

DATA COLLECTION SHEET												
				1) Student personal details	3							
Legal Surname:				Forenames:								
Date of Birth:			Age	e: Sex at birth:	Male / Fer	nale						
If applicable:	Gender	Gender expression/ident			I.		Form:					
	Gender	схрт сээтотту та	Cittie	Treferred gender	i pronouns.		<u>l</u>					
Student's address												
(incl. postcode):												
Previous School:												
			- •									
			2)									
				<u>imbers and email addresses</u> as the school i								
	ed as an all	ternative to po	stai n	mail). Both mobile numbers and email add	aresses are red	quirea for the School Gatewo	iy system.					
Priority 1:		Forename		1	Curnama							
Home Address		Forename			Surname							
(include postcode)												
Telephone numbers		Home:		Wor	·k·							
(Please underline the		nome.	Home: Work:									
contact number)		Mobile:										
Email address		WIODIIC.										
Relationship to chile	•		Peri	mission to collect child from school	Yes/No I	Parental responsibility	Yes/No					
Relationship to chin		Į į	1 (11	Thission to concet child it offi school	103/110	arental responsibility	103/110					
Priority 2:												
Title		Forename		Su	ırname							
Home Address		Torchanic	ı									
(include postcode)												
Telephone numbers		Home: Work:										
(Please underline the												
contact number)		Mobile:										
Email address												
Relationship to child			Peri	mission to collect child from school	Yes/No	Parental responsibility	Yes/No					
					•		•					
Priority 3:												
Title		Forename Surname										
Home Address		- Cremanie	ı									
(include postcode)												
Telephone numbers		Home: Work:										
(Please underline the main												
contact number)		Mobile:										
Email address												
Relationship to child	l		Peri	rmission to collect child from school	Yes/No	Parental responsibility	Yes/No					
					•							
Priority 4:												
Title		Forename		Su	ırname							
Home Address												
(include postcode)												
Telephone numbers		Home: Work:										
(Please underline the main												
contact number)		Mobile:										
Email address					T		1					
Relationship to child			Peri	mission to collect child from school	Yes/No	Parental responsibility	Yes/No					

DIVORCED/SEPARATED ONLY: Does anyone else have parental rights to whom information about school and student should be sent? If Yes, please give details:

Is a court order in force regarding access: YES / NO Please indicate who the court order is for?

Is a second copy of your child's report required? Please indicated which parent is to receive this:

3) Additional student details - CARE											
	•-	Ple	ase tick		Date	Evide	uired by Scl	iool			
Looked After by Author						Not Required					
Adopted from Care Special Guardianship O						Required					
Residence Order						Required Required					
Child Arrangement Ord						Required					
Private Fostering Arran				_	Proc	Proof of address required					
Parent serving in the Ar	•						Not Required				
				•				•			
4) Meal Type											
FSM (Free school meal)	*	Paid sch	ool meal		Packed lunch	1					
* This must be approved		ity		· ·	1						
If your child is entitled t	o FSM (Free school r	neal) hut	does not clai	m the enti	tlement nlease	tick here					
ii your ciliia is circicica t	.0 1 3101 (1 1 0 0 3 0 1 1 0 0 1 1	ilcuij but	does not clai	in the chi	tiement piease	tick fiere					
			5) Me	dical Sun	nmary						
Doctor name:			3) 1416	aicai Juli	iiiiai y						
Practice name:					Telephon	ne number:					
Practice name. Practice address					Тетериот	ie number.					
(incl. postcode):											
(iiici. postcode).											
Does your child have any special dietary requirements due to medical, religious, moral reasons or educational needs? If yes, please give details:											
Will your child need to take any medication during the school day? If you answer yes a letter will be sent to you requesting further information. Yes/No											
	6) Ethnicity					7) R	eligion				
	o, zamicicy				77 Hengion						
	8) Country of B	irth			9) Student Nationality						
	<u>-</u>							-			
				•							
			10) F	irst Langu	iage						
EAL(English is a second	language)		Yes/No	If 'Yes' is	the child profi	cient in Englisl	h?	Yes	s/No		
			11)	Permissio	ons						
Do you give permission	for your child to be a	dministe						Υ	es/No		
Do you give permission for your child to be administered First Aid? Do you give permission for your child to take part in school visits/trips?									es/No		
Do you give permission for your child to take part in Sex Education?							Y	es/No			
Do you give permission for your child's details to be accessed by the Local Authority during data exchange?							Υ	es/No			
It is very importa	nt that you inf	orm us	s immedi	ately of	any chang	ges to the	inforr	nation p	rovided		
This information was pr	int)										
Relationship to the child											
Parent/Carer signature:				Date	Date:						
Privacy Statement				1							

Ormiston Bolingbroke Academy is committed to ensuring that your data is secure. We will only use your personal information if under GDPR, we have a legitimate right to do so and will not distribute that information to third parties unless we have your permission or are required by law to do so. You have the right to request that we remove any or all of your personal information at any time. You can do this by contacting our HR department on 01928 755305.

Our Privacy Policy explains in full how we use your personal data. If you don't want to receive information from Ormiston Bolingbroke Academy and you haven't told us this before, you can let us know by contacting our HR department.