

Pupil Information

Please complete both sides of this sheet



General information:

Legal surname:	Forename(s):
Date of birth:	Chosen name:
Religion:	Ethnicity:
Home language:	
Home address (including postcode):	
Home telephone:	Contact email:

Parent/carer details:

Main parent/carer name:	Relationship to child:
Occupation:	
National Insurance number:	Date of birth:
<i>By providing this information you are agreeing to verification of Free School Meal eligibility.</i>	
Primary contact number:	Secondary contact number:

Secondary parent/carer name:	Relationship to child:
Occupation:	
Primary contact number:	Secondary contact number:

Emergency contact details (when parent/carers are non-contactable):

Name:	Relationship to child:
Primary contact number:	Secondary contact number:

Name:	Relationship to child:
Primary contact number:	Secondary contact number:

Medical Information:

Medical diagnosis:	Other medical conditions:
Known allergies:	Dietary needs:

Medical Practice:	Telephone number:
Address:	

Involved professionals:

Name:	Service:
Contact details:	

Name:	Service:
Contact details:	

Name:	Service:
Contact details:	

Any other relevant information (Court Orders, Shared Parental Responsibility, Injunctions, LAC, etc.) that the school should be aware of:

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Signed:	Date:
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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 keep it up to date. The school is required to share some of the data with the Local Authority and with the Department for Education.