

# WATER STREET PRIMARY SCHOOL ADMISSIONS



## PUPIL INFORMATION (Please complete in BLOCK CAPITALS)

SURNAME		FIRST NAME	
OTHER NAMES		DATE OF BIRTH	
ADDRESS			
POSTCODE		TELEPHONE HOME	
MALE	FEMALE	LANGUAGE SPOKEN AT HOME	

## PARENT INFORMATION – PLEASE LIST IN ORDER OF PREFERENCE TO CONTACT FIRST

PARENT/CARER	CONTACT 1	CONTACT 2	
FULL NAME			
ADDRESS		(if different from contact 1)	
MOBILE			
EMAIL ADDRESS			
PLEASE INDICATE IF ONE OR MORE PARENT IS DOING MILITARY SERVICE		YES	NO
IF PARENTS ARE SEPARATED	Does the absent parent have access?	YES	NO
	Please advise if any conditions are attached and any other information which staff working with your child should be aware of.		
	Does the second parent require a copy of the school report?	YES	NO

## FURTHER CONTACTS TO BE USED IN CASE OF ILLNESS OR EMERGENCY

	CONTACT 3	CONTACT 4
NAME		
TELEPHONE HOME		
MOBILE		
WORK		
RELATIONSHIP TO PUPIL		

## OTHER INFORMATION

CHILDREN AT THIS SCHOOL FROM THE SAME HOUSEHOLD	NAME	CLASS

WHAT IS THE USUAL MODE OF TRANSPORT USED TO GET TO SCHOOL – Please tick ONE BOX ONLY				
WALK	CAR	BUS	CYCLE	OTHER

PUPIL'S PREVIOUS SCHOOL/NURSERY	NAME	
	ADDRESS	
	TELEPHONE	

DOCTOR'S NAME	
ADDRESS	
TELEPHONE	

DETAILS OF ONGOING MEDICATION		
DETAILS OF ALLERGIES/ DIETARY REQUIREMENTS		
Should my child require first aid whilst at school, I give permission for this to be carried out by a member of school staff, who is First Aid trained	YES	NO

In your opinion does your child have a disability? (The DDA definition of a disability is 'A disabled person (child or adult) is someone who has a physical or mental impairment, which has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities') Please provide details. SENCO may wish to contact you for further information.	YES	NO
CHILDREN PREVIOUSLY IN CARE. Please advise school if your child was Adopted from Care or ceased to be looked after through a Special Guardianship Order (SGO) or through a Residence Order (RO)	YES	NO

## ETHNIC BACKGROUND RECORD FORM

NATIONALITY		RELIGION		
Please tick <b>one box only</b> to indicate the ethnic background of your child. 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.				
<b>White</b>	<b>Mixed</b>	<b>Asian or Asian British</b>	<b>Black or Black British</b>	<b>Other</b>
British	White & Black Caribbean	Indian	Caribbean	Chinese
Irish	White & Black African	Bangladeshi	African	Other – please state
Traveller of Irish Heritage	White & Asian	Pakistani	Any other Black Background	I do not wish to record an Ethnic Background
Gypsy/Roma	Any other mixed background	Any other Asian background		
COUNTRY OF BIRTH				

<b>BIRTH CERTIFICATE – Please show this to the School Office</b>	<b>DATE WHEN SEEN (office)</b>	
<b>SIGNED PARENT/GUARDIAN</b>	<b>DATE</b>	

