



SALESBURY CHURCH OF ENGLAND PRIMARY & NURSERY SCHOOL
DATA COLLECTION SHEET

This form should be completed by parents or by those who have parental responsibility or day to day care of the child

Please keep school informed of any changes to this information such as new mobile telephone numbers, changes of address, etc

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 school is required to share some of the data with the Local Authority and with the Department of Education.

PUPIL DETAILS			
Surname:	Forename:	Middle Names:	Legal Surname:
Date of Birth:	Gender:	Sibling Names and Dates of Birth:	
Address:			
Postcode:			
Religion:	Ethnicity:	Country of Origin:	Language:
Previous Schools/Nursery:		Doctor's Name, Address and Telephone Number:	
Any other relevant information you need to provide: Details of medical conditions (asthma, allergies etc), Social Worker/other agencies details, any Legal Orders etc			
Medical:	Social:	Legal:	Other:
PARENT DETAILS			
Please provide details of both parents whether your child lives with them or not			
Mother's Name:	Date of Birth:	Parental Responsibility (Yes/No):	
	NI Number		
Address:	Home Tel No:	Any other information:	
Not known <input type="checkbox"/>	Mobile Tel No:		
EMAIL ADDRESS:-			
Father's Name:	Date of Birth:	Parental Responsibility (Yes/No):	
	NI Number		
Address:	Home Tel No:	Any other information:	
Not known <input type="checkbox"/>	Mobile Tel No:		
EMAIL ADDRESS:-			

PLEASE COMPLETE REVERSE

EMERGENCY CONTACTS/OTHER SIGNIFICANT ADULTS

Please provide details of any other adults who can be contacted in an emergency and/or are a significant adult in your child's life.

These may be parents' partners, step-parents, grandparents, family friends etc

Adult's Name:	Relationship to child:	Address:	Tel No:
Emergency Contact (Yes/No):		Can collect child from school (Yes/No):	

Adult's Name:	Relationship to child:	Address:	Tel No:
Emergency Contact (Yes/No):		Can collect child from school (Yes/No):	

Adult's Name:	Relationship to child:	Address:	Tel No:
Emergency Contact (Yes/No):		Can collect child from school (Yes/No):	

Adult's Name:	Relationship to child:	Address:	Tel No:
Emergency Contact (Yes/No):		Can collect child from school (Yes/No):	

Please give names of any other people who are permitted to collect your child from school:

Please give names of any people who are NOT permitted to collect your child from school and the reasons for this:

Please sign below to confirm that the information provided by you on this form is accurate and up to date and that this information can be shared with relevant agencies to assist in safeguarding your child.

Signed:

Name:

Relationship to child:

Date:

Please note this information is uploaded onto our database, original paper copies are also held. Paper Copies are securely destroyed as they are updated or as your child leaves Salesbury Church of England Primary School.