**New Pupil Enrolment Form**

**This information will remain confidential and will be used by school in line with the General Data Protection Regulations [GDPR] and the Data Protection Act 2018. You will be provided with our ‘Parental Data Consent Form’ to read & sign. See also our academy website for further details.**

**Pupil Details**

Legal Surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth:\_\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_

First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle name(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Names [if used] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: Female / Male

**Birth Cert. seen by** [name] and **confirmed** a] D. of B. b] Chd’s legal name c] parents’ names X 2 are as shown at **1**. and **2**. below

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Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nationality\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Religion:** please name or state none ­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous School or early years provision -**

**­­­­­­­­­­­­­­­­­­­­**

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**Siblings:** If your child has any siblings, please provide their names, ages

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_ \_Class/School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_­­­­­­ \_\_Class/School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_ Class/School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Services** - Does your child have a parent currently serving in the UK Military Yes □ No □

**Please detail any court orders applying to the child e.g. Residency Order/Child Arrangement Order**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**­­­­­­­­­­­­­­­­­­­­**

Has this child ever been in local authority care? If so, please state the reason why this child has left care. Please tick

Adoption □ Special Guardianship Order □ Residence Order □ Child Arrangement Order □ Other □

**Copy of order seen and copy made for academy purposes**

**Ethnicity**  (please state)\_\_\_\_\_­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Languages spoken at home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parents’ Details**

Do you have a support worker or social worker supporting your family Yes □ No □

Additional Information \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Legal Parental Responsibility**

Details of EVERY PARENT/GUARDIAN of the child, including biological parents and parents with **LEGAL PARENTAL RESPONSIBILITY**.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1**.  Mr/Mrs/Miss/Ms | Legal Forename | Legal Surname | | Relationship to child  Mother/Father |
|  |  |  | |  |
| Address (if different from child’s address)  Daytime Telephone Numbers Home: Mobile: Work: | | | | |
| \*Parents’ Date of Birth | \* Parents’ National Insurance Number or NASS Number | | \*We will use this information to find out if your child is entitled to a pupil premium grant which will allow the academy to access additional learning support funding. | |
| **2.**  Mr/Mrs/Miss/Ms | Legal Forename | Legal Surname | | Relationship to child  Mother/Father |
|  |  |  | |  |
| Address (if different from child’s address)  Daytime Telephone Numbers Home: Mobile: Work: | | | | |
| \*Parents’ Date of Birth | \* Parents’ National Insurance Number or NASS Number | | \*We will use this information to find out if your child is entitled to a pupil premium grant which will allow the academy to access additional learning support funding. | |

**Emergency contact details** family members / friends willing to collect your child on your behalf in case of an emergency **if you cannot be contacted**.

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Order 1**  Mr/Mrs/Miss/Ms | Legal Forename | Legal Surname | Relationship to child e.g.  Grandparent/Step Father /Childminder |
|  |  |  |  |
| Address (if different from child’s address) | | | |
| **Daytime Telephone Numbers**  Home: Mobile: Work | | | |
| **Contact Order 2**  Mr/Mrs/Miss/Ms/Ms | Legal Forename | Legal Surname | Relationship to child e.g.  Grandparent/Step Father /Childminder |
|  |  |  |  |
| Address (if different from child’s address) | | | |
| **Daytime Telephone Numbers**  Home Mobile Work | | | |
| **Contact Order 3**  Mr/Mrs/Miss | Legal Forename | Legal Surname | Relationship to child e.g.  Grandparent/Step Father /Childminder |
|  |  |  |  |
| Address (if different from child’s address) | | | |
| **Daytime Telephone Numbers**  Home Mobile Work | | | |
| **Contact Order 4**  Mr/Mrs/Miss/Ms |  | Legal Surname | Relationship to child e.g.  Grandparent/Step Father /Childminder |
|  |  |  |  |
| Address (if different from child’s address) | | | |
| **Daytime Telephone Numbers**  Home: Mobile: Work | | | |

Please confirm that the above named persons have given consent for our school to hold their name, address and phone number

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Details**

Do you give permission for the school to call your medical practice in an emergency Yes □ No □

Do you give permission for the school to administer first aid in an emergency Yes □ No □

Please provide details of any medical conditions the school should be aware of and any emergency action that should be taken (Asthma, Epilepsy, Allergies to bee stings nuts or particular medicines etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Practice name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctor’s name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dietary Requirements**

What type of lunchtime meal will your child be having? School Dinner □ Sandwiches □

Is your child entitled to Free School Meals Yes □ No □

*This does not include Universal Infant Free School Meals where all children in Reception Year 1 & 2 are eligible. Please complete the Free School Meals form the academy will provide.*

Please provide details of any dietary requirements that we should be aware of by ticking the boxes below. Please tick any that apply, even if your child will be bringing a packed lunch.

My child can eat all foods □ My child does not eat pork □ My child does not eat beef □

My child only eats Halal food □ My child is vegetarian (no meat or fish) □

My child has the following allergies/food intolerances

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Parental Consent for / Understanding/Awareness of** (please circle) N**otes**

Use of Internet Permission Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Only Jewellery to be worn stud earing/Watch Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photographs/Video for use in School Publication Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photographs/Video for use on School Dojo Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photographs/Video for use in School Website Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photographs/Video for use within School Premises Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Photographs Class/Individual Photos Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Educational Outings – Local Area Walks**

From time to time children will go on a supervised walk in the local area. If children are travelling by any form of transport we will ask your permission for each trip. Please tick to confirm that you consent to local area walks. □

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_

**Declaration**

I certify that the information given on this form is accurate to the best of my knowledge.

Print name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Article 6(c) of the General Data Protection Regulation EU2016/679 allows for processing of data if in compliance with a legal obligation. Local

Authorities and educational establishments will need to collect and process the above categories of data in order to meet statutory responsibilities

for the provision of education to children in accordance with the requirements of The Education Act 1996 and The School Standards and Framework Act 1988

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

**Harmony Trust Academies Parental Data Consent Form (Privacy Statement)**

As a school, we are legally required to inform you as to the purpose of any data we hold in relation to you or your child. We must also inform you where we will hold the data, who will have access to, how long we keep it for and when we will delete / destroy it. This relates to any data we hold – whether on paper on our computer systems.

Please be assured that we take every step to ensure the safety of this data.

Below, we have outlined the range of information we expect to hold OR are legally obliged to do so. In each section, we have indicated what we are keeping, where it is kept and what we do with it. We require you as a parent to acknowledge (by signing underneath) each section. By doing so, you are acknowledging that you are happy with the arrangements.

We have categorised our data into 4 themes :

1. Personal Information
2. Academic Information
3. Well-being Information
4. Other Aspects

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Personal Information | |  |  |
| **What**  **Information ?** | **Probable Content** | **Why We**  **Require It?** | **Who Has Access**  **To It ?** | **Where Is It Held ?** | **When Is It Disposed Of ?** |
| **Registration /**  **Admissions Data** | Name  D.O.B.  Address  Telephone  Medical Issues  Parental Details | Legally Required  To For Admission  To School    Well-Being of  Your Child    Communication | All Staff  (Where  Necessary) | Initially  Completed On  Paper Then  Entered Onto  School’s  Information  Management  System    Paper Version is Shredded | Held On File  Throughout  Child’s Time At  School    Passed Onto New  School When  Moving    Computer  Retains Copy of  Records in  ‘Archive’ |

☐ I understand the purpose of this data and confirm that I am satisfied with the school’s arrangement for managing it

**Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Academic Information | |  |  |
| **What**  **Information ?** | **Probable Content** | **Why We**  **Require It?** | **Who Has Access**  **To It ?** | **Where Is It Held ?** | **When Is It Disposed Of ?** |
| **External Testing**  **(SAT’s)** | Foundation Stage    Key Stage 1 | Legally Required  To Provide Some Data To The | All Staff  (Where  Necessary) | Data For the DfE  Is Electronically Held | Held On File  Throughout |
| **Internal**  **Assessments &**  **Tests** | Key Stage 2    Weekly  Assessments  (Tests)    Phonics Testing | Department for  Education    To Identify  Strengths and  Weaknesses, So  Teaching Can Be  Made More  Personal |  | Teachers Own  Test Results Are  Held in Their  Assessment Files (Paper) | Child’s Time At  School    Passed Onto New  School When  Moving    Computer  Retains Copy of  Key Records in  ‘Archive’ For 6 Years – But Is  Only Used For  Comparative Purposes |
| **Special**  **Educational Needs** | Testing    Specific  Assessments    Reports from  Professionals (e.g. psychologists,  speech and  language)    Statutory  Assessments | Identify Possible  Learning  Difficulties and  Plan Appropriate  Interventions    To Apply For  Additional  Funding or  Resources    To Identify  Additional Needs    To Identify  Appropriate  Placements    Annual / Regular  Returns to the  Dept for  Education Or  Local Authority    OFSTED  Inspections | Class Teachers    Senior Staff  (Headteacher or  Principal)    Special  Educational Needs  Coordinator  (SENCO)    Local Authority    Teaching  Assistants    Administrative Staff | Held In A Variety of Forms,  Dependant on the Nature of the  Information | Held On File  Throughout  Child’s Time At  School    Passed Onto New  School When  Moving    School Retains A  Copy Until the  Child’s 26th  Birthday |

☐ I understand the purpose of this data and confirm that I am satisfied with the school’s arrangement for managing it

**Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Well-Being Information | |  |  |
| **What**  **Information ?** | **Probable Content** | **Why We**  **Require It?** | **Who Has Access**  **To It ?** | **Where Is It Held ?** | **When Is It Disposed Of ?** |
| **Behaviour Records** | Pupil Names    Dates | Well-being of  Children    Identify  Behaviour Trends | Class Teachers    Senior Staff    OFSTED |  |  |
|  | Schools Action /  Response    Reports of the  Incident | Identify Resource  Needs    Monitor Whole  School Behaviour |  |  |  |
| **Safeguarding Records** | Family Details    Social Care  Reports    Legal  Documentation    Incident / Event  Reports    Referral  Documentation    Records of  Involvement (e.g.  counselling, tutors  etc) | Legal  Requirement    Minimise the  Risk of Harm :  emotional,  sexual, mental  and physical    Identify Relevant  Support | Class Teachers    Senior Staff    Social Care in  Local Authority    Voluntary  Support Agencies or Charities    School  Safeguarding  Coordinator    Governors  (Anonymised Data Only) |  | Held On File  Throughout  Child’s Time At  School    Passed Onto  New School  When Moving |

☐ I understand the purpose of this data and confirm that I am satisfied with the school’s arrangement for managing it

**Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Other Aspects | |  |  |
| **Aspect** | **Nature of Material** | **Where It Appears** | **Why We**  **Have It** | **Who It Can Be Accessed By** | **Limitations** |
| **Photographs** | Class  Photographs    Photographs  Used On Displays  Around the  School    School Website | Copies Sent To  All Parents  Annually    Display Boards  Around the  School    News Pages,  Photo Gallery On Our Website | Record of Child’s  Time In School    Parental  Expectations    Celebrate  Achievements    Illustrate  Something e.g.  Learning Point or Activity | Photographs Are Sent to All  Parents    Displays Are Seen  By All Those In  The School  Building (pupils, parents, visitors, staff etc.)    Website Is A  Public ‘Portal’ | Where  Photographs Are Used In the  School, We Only  Use a First Name    Children  Considered  Vulnerable or At  Risk Will Not  Normally Be Included |
| **Displays** | Pupils Work  Photographs  Newspaper  Articles  Letters  To Support Pupils  Learning in the Classroom | Display Boards  Around the School and  Classrooms | Celebrate  Achievements    Illustrate  Something e.g.  Learning Point  Support Learning | Displays Are Seen  By All Those In  The School  Building (pupils, parents, visitors, staff etc.) | Staff Will Only  Use Relevant Materials |
| **School Visits and Holidays** | Names    DOB    Address    Telephone  Contacts    Medical  Information    Special Needs | Details Are  Gathered By  Teachers for  Specific Visits    Some  Information may be passed to the visit organisers or company    Online Visit  Approval Systems    Paper Based OR Electronic | Health and Safety    Respond to  Incidents    Notifying Parents  / Guardians In A  Timely Manner of Changes or Issues | School Staff On  The Visits /  Holiday    Visit Organisers    Local Authority  Visits Approval  Systems    Visit / Holiday Providers | Information Will  Only Be Shared  With Those Who  Need To ‘Know’  To Ensure A Safe,  Secure and  Happy Visit |

☐ I understand the purpose of this data and confirm that I am satisfied with the school’s arrangement for managing it

**Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Additional Statement :** *Whilst we have endeavoured to outline all the areas in which we gather data, there may well be some additional (short term or specific) requirements. Details related to these can be found on the school website, which will be updated regularly.*

**Child’s Name :**

**Date of Birth :**

**Name of Person Completing Form :**

**Relationship to Child :**

As a person with parental responsibility for the above named child, I understand that by signing this statement I am acknowledging that I am aware of the schools data gathering and processing activities and that I am happy with the purposes and practices outlined here. I further confirm that I recognise that whilst the school has attempted to identify all possible data sources and practices that it uses, there may well be circumstances where this has not been the case and that this is merely by omission. I therefore consent to the school’s use of the data and information outlined for the above named child.

**Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**