



**ADMINISTRATION RECORD  
Pupil Admission and Registration**

Please complete this form as required, referring to the notes on the back page. The information which is requested in this document may be stored on a computer and is subject to Data Protection Act 1998. The Act requires that all information is strictly confidential and may only be accessed by those with a legal right to see it, e.g. if there is a child protection enquiry. The information will not be given to anyone else without your written consent.

You have the right to examine, at any reasonable time, information about you or your child which is kept on a computer. You have the right to correct any information which you feel is wrong or misleading. Please contact the Head teacher if you wish to examine the information about you or your child which is kept on computer.

The information you give us will help to ensure that all parents receive what the law entitles them to have with regard to their child's education. It will also help us to safeguard and promote your child's welfare at school. Please keep us constantly updated with any changes to the information on this form.

For official use only	
Admn no.	<input type="text"/>
Adm date	<input type="text"/>
Class	<input type="text"/>
Interview	<input type="text"/>
Info sent	<input type="text"/>
Prev Sch Recs	<input type="text"/>
House	<input type="text"/>
Database	<input type="text"/>
Accounts	<input type="text"/>
Code	<input type="text"/>

**Details of Child**

Surname of child (note 1):	
First names:	Gender (please circle): Male / Female
Chosen name, if different to first forename (note 2):	
Date of birth:	Year group at admission date:
Address:	
Postcode:	
Telephone:	
Position in family (please circle):	1 2 3 4 5 6 7 (where oldest child is 1, etc)

**Details of Parents /Guardians (note 3)**

Name and address if different from above	Occupation	Relationship to child (6)	Parental responsibility (7)	Daytime and/or mobile telephone numbers
			Yes / No	
			Yes / No	

Marital status (note 4):	Email:
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## Pupil Admission and Registration 2

### Names of others with Parental responsibilities

When the child lives with someone other than his or her parent(s), the school needs details of those persons who have parental responsibility. This is always the natural mother and, where parents were married at the time the child was born, the natural father also retains parental responsibility.

name of others with parental responsibility	Relationship to child (note 6)	Address	Telephone number

If parents are separated or divorced, has a court order been issued?

Yes / No

### Emergency Contacts

Very occasionally a child needs urgent medical treatment and then it is essential that we or the hospital are able to get in touch with you. It would also help if you indicate any medical conditions your child has which you feel the school should be aware of.

**These are very important to us.** If your child becomes ill during the day, we need to be able to contact someone acting for you who is able to collect your child. Please give two emergency contact numbers. We suggest the telephone numbers of any place of work and one other emergency contact, perhaps a grandparent if they live close by. If you have no relatives in the area, then ask a friend, neighbour or childminder if they would be willing to act as an emergency contact.

Name (note 5)	Relationship to child (6)	Telephone number	Place of contact

### Medical Information

Name of doctor:	Telephone:
Does your child have an ongoing medical condition?	
(include details of allergies and/or regular medication)	
Has your child ever suffered from a serious illness?	
If so, what?	
Has your child ever had an anti-tetanus injection?	
If so, when?	
Does your child suffer from asthma?	
If so, when was his/her last serious asthma attack?	
How frequent are these attacks?	
Please give details of present medication and type of inhaler used	

### Educational Information

**Please not that our policy states in the prospectus and the website about additional provision for children with learning difficulties**

Has your child any special education needs? (e.g. difficulty with reading e.g. small groups, special teaching etc, writing or attention etc)

If so, please give details of any assessments and additional support already being given. (e.g. small groups, specialist teachers)

Has your child ever been referred to any educational specialist for formal assessment?

If so, please attach the report to this document

Has a statement of special educational needs been issued in respect of your child?

Yes / No

If yes, have you agreed that LEA provision will follow your child to the school?

Yes / No

### Pupil Admission and Registration 3

Has your child any physical disability or additional educational needs?  
 If so, please give details

Does your child wear glasses?	Yes / No	Does your child wear a hearing aid?	Yes / No
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**Details of previous school** (please attach reports (latest school records))

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Church Details** (Please attach completed reference form)

Place of worship attended regularly: \_\_\_\_\_

Minister/Pastor's name, address and telephone: \_\_\_\_\_

**Ethnicity**

The collection of ethnically based data is becoming increasingly recognised as a means of celebrating diversity and also ensuring fair and equal treatment for all. The information you are asked to give below is also asked for as part of national monitoring. Please tick the appropriate classifications.

**Ethnic Origin of Child**

White - British	<input type="checkbox"/>	White Irish	<input type="checkbox"/>	White - any other white backgrounds	<input type="checkbox"/>	Mixed - White and Black Caribbean	<input type="checkbox"/>	Mixed - White and Black African	<input type="checkbox"/>
Mixed - White and Asian	<input type="checkbox"/>	Mixed - Any other Mixed background	<input type="checkbox"/>	Asian or Asian British - Indian	<input type="checkbox"/>	Asian or Asian British - Pakistani	<input type="checkbox"/>	Asian or Asian British - Bangladeshi	<input type="checkbox"/>
Asian or Asian British - Any other	<input type="checkbox"/>	Black or Black British - Caribbean	<input type="checkbox"/>	Black or Black British - African	<input type="checkbox"/>	Black or Black British - any other	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Gypsy Roma	<input type="checkbox"/>	Travellers of Irish Heritage	<input type="checkbox"/>	Any other ethnic group	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>		

Language spoken at home: \_\_\_\_\_

**Please give your reasons for choosing S.C.A**

**Parental Affirmation**

I/we have read the school prospectus, looked at the website information and, should my/our child be enrolled, give my/our support to the aims of the school. I/we shall encourage my/our child to meet required standards of behaviour, appearance and academic work, I/we hereby give permission to the Principle and Staff to act in my/our stead during school hours in all appropriate matters of care and discipline.

I/we accept and approve the Admission Statement as the basis for my/our child's admission into the school. I/we understand and accept my/our joint obligation to pay school fees as are due and will undertake to pay such fees on a monthly basis and other various fees as they arise.

The information I/we have entered is correct to the best of my/our knowledge and belief.

Signature (Father or Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Name in BLOCK capitals: \_\_\_\_\_

Signature (Mother or Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Name in BLOCK capitals: \_\_\_\_\_

## Pupil Admission and Registration 4

### Notes

1. Children should be registered by the surname on their birth certificate *unless* their name has been shown after legal name and in brackets, e.g. Smith (Jones)
2. A child's chosen, or familiar, name is the first name by which they *like* to be called in school.
3. Give the names of *both parents* and anyone who is not an actual mother or father but who lives with the child and helps to bring him or her up. Unmarried fathers need not be included unless they have obtained parental responsibility.
4. Please enter one of:  
MARRIED, DIVORCED, SEPARATED, UNMARRIED, WIDOWED
5. In which order should these people be contacted? You should enter these in the order in which you would like us to contact them.
6. For *each person*, choose one of the codes below and enter it in the "relationship to Child" column. The code selected should be the one which best describes the person's relationship with the child.  
PAR = natural mother or father  
ADP = adoptive mother or father  
STP = carer who is a spouse or partner of the mother or father and who is living with the child  
GRP = grand parent  
NGB = neighbour  
FOS = Foster carer  
REL = other relative  
CON = other contact persons  
If categories are needed which are not listed here, please advise the school.
7. Please put **Y** (yes) and **N** (no) against *each person* to show who has 'parental responsibility' under the Children Act 1989. The people with legal authority for the child are:  
(a) *married* / *separated* / *divorced* parents - *both* parents have parental responsibility, even if they do not live with the child.  
(b) *unmarried* parents - *only* the mother has parental responsibility unless the father has obtained it by agreement or via a court order.  
(c) *other* people - only have parental responsibility through court orders, etc, -step-parents do not have parental responsibility automatically but are still "parents" while they live with the child; there may, however, be times when the signature of those with parental responsibility will be required.