Student and Parent/ Carer Information



Legal Name of Pupil (incl. first					
name, middle name, surname)					
Preferred Name					
Address					
Date of Birth					
Gender	MALE/ FEMALE				
Nationality	TOTAL TENTALE				
First Language					
Looked after Child	YES/NO				
Parent/ Carer Name	123,110				
Preferred Name					
Address (if different from above)					
Address (ii different from above)					
Please confirm key contact					
If more than one parent/ carer req	uires information, e.g. cancelled	sessions	, progres	s inf	formation etc., please
ensure we have all required teleph			,, 0		, ,
Tel Numbers for Text Messages					
Name	Mobile		ı	Rela	itionship
	1.				·
	2.				
	3.				
Email Contact for Messages					
Name	Email address		1	Rela	itionship
	1.				·
	2.				
	3.				
Emergency Contact Numbers					
Name	Tel	Relationship			Priority to ring (1 to 3 with
					1 being priority first)
	1.				
	2.				
	3.				
School attending					
Marana a					
Year group	Adulta must be asset 40 secure 4		Dolotic	- a b :	n to child
Who Collects Me?	Adults must be over 18 years of	s of age Relation		ISNI	p to child
Is collected by an adult called: 1.					
Is collected by an adult called: 2.					
Is collected by an adult called: 3.			1		

Medical Details

Does your child have any specific dietary requirements? If so, please give details incl. food dislikes Does your child take any medication including the use of an inhaler? If yes, please detail the medication, dosage requirements and times taken. If medication needs to be taken during the sessions, please ask for a medication form – long term or short term. Does your child have any sight, hearing or speech defects? Does your child have diabetes, asthma or epilepsy? Is there any other health information that you may think may be relevant? E.g. Prolonged hospitalisation, undergoing investigations, medical restrictions etc. Learning and Social Details Is there any social and emotional information that you may think may be relevant? E.g. lack of confidence, limited concentration etc. What are your child's interests and hobbies? Do they attend any clubs or organisations? What is the desired outcome from the sessions? What do you and/or school feel the focus needs to be? Signature of parent/ carer: Date:	Has your child any food or any other allergies? If yes, please detail below
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Data privacy The General Data Protection Regulation (GDPR) (**Regulation** (EU) 2016/679) puts in place certain safeguards regarding the use of personal data by organisations. Parents/ Carers are asked to pay particular note to advice from the ICO with regards the GDPR principles: https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/principles/ and your individual rights: https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/individual-rights/