



Norris Bank Primary School

DATA COLLECTION SHEET

Surname..... Legal Surname

Forename Middle Name

Chosen Name Gender

Date of Birth Year Group

Address

.....

.....

Post Code

Please give details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Place them in the order that you wish for them to be contacted.

Priority	Name / Relationship	Home Address / Phone / Mobile	Work Address Phone / Email
1			
2.			
3.			

Travel Arrangements

<input type="checkbox"/> Bicycle	<input type="checkbox"/> Train	<input type="checkbox"/> Car/Van	<input type="checkbox"/> Walk	<input type="checkbox"/> Taxi	<input type="checkbox"/> School Bus	<input type="checkbox"/> Car Share
<input type="checkbox"/> London Underground	<input type="checkbox"/> Public Bus Service	<input type="checkbox"/> Metro/Train/Light Rail	<input type="checkbox"/> Other			

Dietary Needs

Dietary Preferences

Meal Arrangement School Meal Paid / Free School Meal / Packed Lunch (circle as appropriate)

Medical Practice:

Address:

Telephone Number:

Medical Condition(s)

This may be shared with the school nurse.

Medical Note(s)

Ethnicity:

Home Language:

Religion:

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 DCSF.

Signature:

Date: