



Southern Road Primary School

Southern Road, Plaistow, London E13 9JH

Headteacher: Ms. Stephanie Lachowycz

Tel: 020 8471 9048/Fax: 020 8471 4512

New pupil admission form (primary)

Information on Child:

Name of Child:

Known as: Sex:

Date of Birth: Country of Birth:

Address:
Post Code:

Home Tel No: Mobile Tel:

Home Languages: Is English spoken at home?

Religion: Dietary Requirements:

Position of Child in Family:

Brothers and Sisters:

Medical Information:

Doctor's Name: Tel No:

Doctor's Address:

Does your child have a medical condition that we should know about?

Further information:

FOR SCHOOL USE ONLY

Class Allocated Year

Admission No UPN

Proof of address Admission Date

Birth Certificate Date form completed

School meal: FREE HOME PACKED LUNCH PAID

RECORDS Sent For On Received On

Information on Home and Family:

MOTHER's Name:

Address:

Tel. Nos:

Country
of Birth:

FATHER's Name:

Address:

Tel. Nos:

Country
of Birth:

Who has PARENTAL RESPONSIBILITY for child?

Mother

Father

Both

Other

If 'Other' has PARENTAL RESPONSIBILITY for child, please give full details:

Name of Carer(s):

Relationship to child:

Is the child 'looked after'
by a local authority?

Name of
local authority

Emergency Contacts:

We need details of two people other than the Parents/Carers, who we can contact if there is an emergency:

Name: (1)

Tel:

Address:

Relationship
to child:

Language
Spoken

Name: (2)

Tel:

Address:

Relationship
to child:

Language
Spoken

Last school or Nursery attended:

(add address if known)

Other educational experience:

(e.g. Schools attended incl. in another country, supplementary school, religious school, Saturday school)

Date of child's first admission to a UK school (if known):

Additional Information:

Please add any further information that you may wish the school to know about.

(eg, you may wish to inform us of other important information about your child and family. The school also needs to know if your child has any Special Educational Needs)

Parental Consent

During the academic year, it is expected that various trips will be organised during the school day to support the teaching of the National Curriculum. You are asked to complete and return this general consent form. All trips will be subject to the general conditions set out below, unless specifically notified otherwise in writing.

1. I agree to my child taking part in local visits and day trips which may occur from time to time during the course of the school year.
2. I understand that the school and the organisers will take all reasonable and proper precautions for the care and safety of my child and of his/her personal property. I also understand that the Council and the organisers will only be responsible for any injury or loss of personal property if this is caused by the Council's negligence.
3. I agree to inform the school of any relevant medical or other special circumstances affecting my child, including any treatment required during the course of a visit.
4. I understand that if my child should need emergency medical treatment, every effort will be made to contact me before treatment is given. If, however, this is impossible, I give my consent to my child undergoing emergency medical treatment.

SIGNED:
(Parent/Carer)

DATE:

What is your child's ethnic group?

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, their skin colour, language, culture, ancestry or family history. **Ethnic group is not the same as nationality or country of birth.**

Please study the list below and tick one box only

_____ to indicate the ethnic background of the pupil named on this form.

White

- ◆ British WBRI _____
- ◆ Irish WIRI _____
- ◆ Traveller of Irish Heritage WIRT _____
- ◆ Gypsy/Roma WROM _____
- ◆ Other White background:
 - Kosovan WKOS _____
 - Turkish/Turkish Cypriot WTUR _____
 - White Eastern European WEEU _____
 - Any other White WOTW _____
 - Background WOTW _____

Mixed

- ◆ White and Black Caribbean MWBC _____
- ◆ White and Black African MWBA _____
- ◆ White and Asian MWAS _____
- ◆ Any other mixed background MOTH _____

Asian or Asian British

- ◆ Indian AIND _____
- ◆ Pakistani APKN _____
- ◆ Bangladeshi ABAN _____
- ◆ Sri Lankan Tamil ASLT _____
- ◆ Any other Asian background AOTA _____

Black or Black British

- ◆ Caribbean BCRB _____
- ◆ African:
 - Nigerian BNGN _____
 - Somali BSOM _____
 - Other Black African BAOF _____
- ◆ Any other Black background BOTH _____

Chinese

CHNE _____

Other ethnic backgrounds

- ◆ Afghani OAFG _____
- ◆ Filipino OFIL _____
- ◆ Kurdish OKRD _____
- ◆ Iranian OIRN _____
- ◆ Iraqi OIRQ _____
- ◆ Other Arab background OARA _____
- ◆ Vietnamese OVIE _____
- Latin, South or Central American OLAM _____
- ◆ Any other ethnic group (please write in) OOEG _____

I do not wish an ethnic background category to be recorded

REFU _____

DATA PROTECTION ACT 1998

The information provided on this form will be used to monitor student performance whilst studying at Southern Road Primary School, and for administration and educational research purposes. This information will also be disclosed to other professional bodies in order to effectively manage the provision of education services.

If you require further information please contact the Headteacher.