

Data Collection Form Complete complete fully and return to the school office

Surname:									Legal S	urname:				
Forename:									Middle	name:				
Chosen name:									Gender					
Date of Birth:						Year:	Red	ception	Reg Group:					
Add	dress:													
Pos	st Code	::												
Tel	ephone	::												
Em	Email:													
My Child:			is in foster care □ has been adopted from care □ is subject to a special guardianship order □ is subject to a residence order □ is subject to a child arrangement order □											
Nur Nur Nur	sery/Pla sery/Pla sery Pla se give	ayschoo ayschoo ayschoo details	ol Name: ol Address: ol Telephon of all person	e N	0: ho have p	s attended o	onsibili	ty and an	yone else yo			. Primary 	ency.	
			e/Relation			for them to be contacted in an emergency. Home Address/Phone/Mobile/Fax					Work Address Phone/Email			
1.	•				Ad	ddress:				Tel: Email:				
					Te Mo	el: obile:								
2.					Ad	ddress:				Tel: Email:				
						obile:								
3.					Ad Te	ddress: el:				Tel: Email:				
						obile:								
Plea	ise indic	ate hov	your child	will	usually t	travel to school	ol.							
	Bicy		Train		Car/Va		lk	Taxi		ool Bus		Car Share		
	Lond	lon Un	Inderground Pub			olic Bus Service Metro/1			Train/Light Rail			Other		



Dietary Arrangements:										
Dietary Requirements:										
Food Allergies:										
Meal Plan:										
Tune of Med	Tupe of Meal Mon		ues	Wed	Thurs		Fri			
Type of Meal School Meal	Mon	•	ues	vvea	Inurs		FTL			
Packed Lunch										
Home										
Tionic										
Medical Information:										
Medical Practice:										
Address:										
Telephone Number:										
Medical Condition(s)										
Other Information:										
Previous school:										
Special Educational Needs:										
Ethnicity:				M. et a disc						
Place of Birth		1 1	1	Nationality						
Languages spoken Home:	at	1.	2.	Religion:						
	e follo	wing guestion	s to determi	ne whether your ch	ild is a	liaible for	Punil Premium			
Funding.	e joilo	wing question	is to determit	ite witetiter gour cit	iiu is e	iligible joi	r apit i rentiant			
_	th an a	ınnual income a	ssessed by HM	RC of less than £16,19	90. 🗆					
				x Credit you do not q		or freeschoo	l meals regardless			
of income).										
(Where a claimant receives a 4 week 'run on' of Working Tax Credit they became eligible to claim free										
school meals for that 4-week period only – please tell us if this is why you are applying)										
Income-Based Job Seeker's Allowance.										
Income-Related Employment Support Allowance. (Contribution-Based JSA and ESA only qualifies if receiving equal amount or lower of Income-Related										
JSA/ESA)	3cu 037	47.4 2571 6711	y qualifies if	receiving equal and	ount o		meome netacea			
Income Support. \square										
Guarantee Element of State Pension Credit.										
Support under Part VI of the Immigration & Asylum Act 1999. \square										
Data Protection Legislation: The school is registered with the Information Commissioner for holding and										
processing of 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 other agencies including Warwickshire County Council and the										
Department for Education. Please see our Privacy Notice for full details of how we use and share the above										
personal information. Please note that you have the right to withdraw or amend your consent for the sharing of										
personal information at any time, although we will need to have certain personal information to fulfill our legal duties. You can notify us of a withdrawal of or any changes to your consent in writing by contacting										
			of or any char	nges to your consent i	n writin	ig by contac	ting			
admin2622@welea	rn365.0	com								
Signature:					Da	te:				