

Details of the child

Legal Surname: _____

Preferred Surname: _____

Forename/s: _____

Preferred forename: _____

Date of Birth: _____

Gender (Male/Female): _____

Address: _____

Postcode: _____

Home telephone number: _____

Family Information

(1) Mr/Mrs/Miss Surname: _____ Forename: _____

Relationship to the child: _____

Address: _____

(if different from the child)

E-mail: _____

Mobile Number: _____ Work Number: _____

(2) Mr/Mrs/Miss Surname: _____ Forename: _____

Relationship to the child: _____

Address: _____

(if different from the child)

E-mail: _____

Mobile Number: _____ Work Number: _____

Name and DOB of any brothers/sisters already at Shrewsbury Academy:

1: _____ DOB: _____

2: _____ DOB: _____

Emergency Contact Details (*NOT PARENT/CARER – IT MUST BE A THIRD PARTY)

Please fill in the details below for people you would be happy for us to contact should your son/daughter need to be collected from school and we are unable to contact you.

1. Name: _____ Tel (home): _____

Work: _____ Mobile: _____

Relationship to the student: _____

2. Name: _____ Tel (home): _____

Work: _____ Mobile: _____

Relationship to the student: _____

Medical Details

Medical Practice and Address:

_____ Telephone: _____

Medical Conditions: _____

Please give details of any medication taken:

****Please note, if your child takes medication, you will need to speak to our Pastoral Team to provide further details and arrange for the medication to be stored in the First Aid Room.**

Ethnicity

Ethnicity: _____ Nationality: _____

Home Language: _____ English as an Additional Language* Yes/No

Home Religion: _____ Country of Birth: _____

Proficiency in English: New to English/Fluent/Other

*The definition of a pupil whose first language is not English is:

“where the pupil has been exposed to a language other than English during early development and continues to be exposed to this language in the home or in the community”.

The definition therefore includes some bilingual pupils whose English is stronger than their first language.

Travel Information : Please tick relevant box regarding how your child will travel to school on a daily basis.

Car ___ Cycle ___ Public Bus Service ___ Taxi ___

Train ___ Walk ___ Other ___ (Please state) _____

Please indicate which route if travelling by bus _____

Service Children in Education

Please indicate if your child is a service child (has a parent in HM Forces) Yes ___ No ___

Special Educational Needs

Does your child have Special Educational Needs? Yes ___ No ___

Looked after children

Please tick the box if your child for whom you are applying a school place is “looked after” by a local authority or if they were previously “looked after” and then adopted.

Looked after by which authority? _____ Currently looked after: ___

Previously looked after: ___

Adopted from care: Yes ___ No ___

Permissions

We need your permission for certain aspects of your child's education – please circle yes or no as appropriate:

- | | | |
|----------------------------------|-----|----|
| • Administer First Aid | Yes | No |
| • Copyright | Yes | No |
| • Data Exchange | Yes | No |
| • Internet Access | Yes | No |
| • Photograph Consent | Yes | No |
| • School Visit Permission | Yes | No |
| • Sex Education | Yes | No |
| • Youth Support Services | Yes | No |
| • Biometric Consent (thumbprint) | Yes | No |
| • Covid-19 Testing | Yes | No |

Data Protection Act

The information requested in this document will be stored on a computer and is subject to the 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.

Please sign and date below when all information has been completed

Signed: _____ Date: _____

Thank you for completing this form, it will help us to maintain accurate records about your child.

Once complete please send this form in the **stamp addressed envelope** provided in your pack or to:

J.Jones
Shrewsbury Academy
Corndon Crescent
Shrewsbury
SY1 4LL

If you have any queries or questions please do not hesitate to get in touch with us on SAYear6@sa.sat.coop

Shrewsbury Academy 

Part of the **Marches** Academy Trust

Office Use Only:

Tutor Group: _____ Date: _____
Data Input by: _____ Date: _____