



Data Collection and Multi-Purpose Consent Form

Please complete all sections of this form.

Information

Pupil		
Legal Surname		
Legal name has been confirmed by birth certificate.	Yes	No
Surname to be known as		
First Name		
Middle Name(s)		
Gender		
Date of Birth		
Year Group		
Address		
Post Code		
Home Phone		
Year		

Please give details of all persons who have parental responsibility (for example, birth mother, birth father or legal carer)

Parent/carer						
Name						
Relationship to student	Legal Parent	Yes	No	Carer	Yes	No
Address						
Home Phone						
Work Phone						
Mobile Phone						
Email						
Key Worker as defined by Government for Covid-19	Yes			No		

Parent/carer						
Name						
Relationship to student	Legal Parent	Yes	No	Carer	Yes	No
Address						
Home Phone						
Work Phone						
Mobile Phone						
Email						
Key Worker as defined by Government for Covid-19	Yes			No		

Parent/carer						
Name						
Relationship to student	Legal Parent	Yes	No	Carer	Yes	No
Address						
Home Phone						
Work Phone						
Mobile Phone						
Email						
Key Worker as defined by Government for Covid-19	Yes			No		

Emergency release

I give my consent for my son/daughter to be released to the following person(s) in the event of emergency or illness, if I cannot be contacted:

Person 1	
Name	
Address	
Relationship to pupil	
Home Phone	
Mobile Phone	

Please indicate whether you have given your consent in each case by ticking the correct box; and sign and date the form on the last page.

Meal arrangements

Free school meals	Paid school meals	Sandwiches

Please outline any food allergies/specific dietary requirements:

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Cashless catering

Should you, as parents, or your child decide not to use the biometric scanning process a smart card can be issued for use at the top up machines and tills. However, it is vital that the student remembers to bring the card in to school each day and keeps it safe (thus preventing the risk of fraud) as the cost of a replacement if the card is lost or forgotten is £5.

I give my permission for my son/daughter:	Yes	No
To be registered on the Biometric IMPACT software and understand this this involves a finger scan in order to produce a digital signature		
<i>OR</i>		
To use a smart card		

Travel Arrangements

Walks	Bike	Car	Taxi	Other

Medical consent

I give my permission for:	Yes	No
My son/daughter to be given first aid by a trained member of staff during any on-site or off-site activity		
My son/daughter to receive urgent dental, medical or surgical treatment, including anaesthetics, as may be considered necessary by the medical authorities present, during any on-site or off-site activity		
My son/daughter's information to be shared with the NHS and other relevant health professionals		
A member of school staff to sign on my behalf any medical consent forms, if my son/daughter should require emergency treatment and I cannot be contacted		
My son/daughter to use the emergency asthma inhaler		
Plasters to be applied to my son/daughter		
My son/daughter to use anti-bacterial hand gel		
My son/daughter to be assisted in applying sunscreen if necessary		
Staff to administer the medicines I have listed below:		

Please outline any medical conditions/allergies:

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Medical contact	
Doctors Name	
Address	
Phone	

Ethnicity

Please select your Ethnicity* by ticking one of the boxes below. If you need any assistance completing this then please contact the school.

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

Ethnic Category	Description	Please tick one box
White	White - British	
	White - Irish	
	White - Traveller (Irish Heritage)	
	White - Gypsy/Roma	
	Any other white background	
Asian	Asian - Bangladeshi	
	Asian - Indian	
	Asian - Pakistani	
	Any other Asian background	
	Mixed - White/Asian	
Black	Black - African	
	Black - Caribbean	
	Any other Black background	
	Mixed - White/Black African	
	Mixed - White/Black Caribbean	
Chinese		
Other Category	Any other Mixed background	
	Any Other Ethnic Group	
Refused		

Country of Birth	
Religion	

Language

Please select your child's first language by ticking one of the boxes below. If you need any assistance completing this then please contact the school.

First Language	Please tick one box
Afrikaans	
Amharic	
Arabic	
Arabic (Any Other)	
Arabic (Sudan)	
Bemba	
Bengali	
Bengali (Sylheti)	
British Sign Language	
Bulgarian	
Burmese/Myanma	
Catalan	
Chichewa/Nyanja	
Chinese	
Chinese (Cantonese)	
Chinese (Hakka)	
Chinese (Mandarin/Putonghua)	
Czech	
Danish	
Dari Persian	
Dutch/Flemish	
Ebira	
Efik-Ibibio	
English	
Farsi/Persian (Any Other)	
Fijian	
Filipino	
Finnish	
French	
Gaelic/Irish	
German	
Greek	
Gujarati	
Hindi	
Hungarian	
Indonesian/Bahasa Indonesia	
Italian	
Italian (Sicilian)	
Japanese	
Kannada	

First Language	Please tick one box
Katchi	
Korean	
Kurdish	
Latvian	
Lithuanian	
Malay (Any Other)	
Malay/Indonesian	
Malayalam	
Marathi	
Mauritian/Seychelles Creole	
Mongolian (Khalkha)	
Ndebele	
Nepali	
Norwegian	
Panjabi	
Persian/Farsi	
Polish	
Portuguese	
Portuguese (Brazil)	
Romanian	
Russian	
Serbian/Croatian/Bosnian	
Shona	
Sinhala	
Slovak	
Spanish	
Swahili (Any Other)	
Swedish	
Tagalog	
Tagalog/Filipino	
Tamil	
Thai	
Tiv	
Tonga/Chitonga (Zambia)	
Turkish	
Ukrainian	
Urdu	
Vietnamese	
Welsh/Cymraeg	
Xhosa	

If your first language is not listed then please enter it in the space below.

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Use of information and image (including photographs and video recordings)

To comply with Data Protection requirements, we need your permission before we can photograph or make any recordings of your child.

This form is designed to allow you to register for you to consent to the use of photographs in certain situations and you are free to decide how and when any images of your child may be used.

We will not use any images of children where we do not have parental consent. Where a parent fails to return a photo consent form we will assume consent has **not** been given.

I give my permission for my son/daughter's:	Yes	No
Name to be used on the school website, printed publications and local media		
Work to be used in school displays and on the school website		
School photograph to be taken (this is used on internal register systems)		
Image to be used within school (for example, in wall-mounted displays)		
Image to be used in Learning Journeys/ Records of Achievement belonging to them or other students		
Image to be used in printed school publications (for example, the school prospectus)		
Image to be used on the school website and in the local media		
Image to be used on the school's social media sites (for example, Facebook, Twitter)		
Image to be used in communication with international pen pals		
Image to be taken by, or used in circulation to, other parents (for example, school events)		

This form is valid for the period of time your child attends this school. Images of your child will not be used after this time. We will not re-use any photographs or recordings after your child leaves this school but images may remain on school websites and social media feeds in an 'historical' context.

On-site Activities

I give my permission for my son/daughter to:	Yes	No
Use the internet in line with the school's acceptable usage policy		
View films and video clips rated PG		
Take part in food preparation/cooking and tasting activities		
Attend after school clubs		

Off-site activities

The trips and activities covered by this consent include;

- all visits (including residential trips) which take place during the holidays or a weekend
- adventure activities at any time
- off-site sporting fixtures outside the school day,
- all off-site activities for nursery schools.

The school will send you information about each trip or activity before it takes place. You can, if you wish, tell the school that you do not want your child to take part in any particular school trip or activity.

I give my permission for my son/daughter to take part in:	Yes	No
Supervised visits to local destinations away from the main school site		
Supervised one-day non-residential visits within the UK		
Supervised off-site activities (for example, sporting fixtures and swimming lessons)		

Sporting activities

Students will take part in regular sporting activities both on and off the school site and sometimes out of school hours.

I understand that:	Yes	No
My child will be under obligation to obey all instructions given by staff and observe all rules and regulations governing the activity and will be subject to all normal school discipline during the activity		
I must notify the school of any existing medical condition or physical disability my child has		
It is my responsibility to inform the school if my child develops a medical condition or disability or if an existing medical condition or physical disability gets worse		
My child must make arrangements to get home from school after the activity, as the school cannot be responsible for students once they return and leave the school site		
The school accepts no responsibility for sporting injuries sustained		
All students are covered by Third Party Public Liability Insurance by Cheshire West and Chester. These arrangements do not provide personal accident cover		

Communication

The school uses email and text alerts to send letters and correspondence.

I give my permission for the school to contact me via:	Yes	No
Phone		
Email		
Text message		

The information in this form will be used throughout your child's time at school. You may withdraw your consent at any time by contacting the school.

Name:

Signed:

Date: