## The John of Gaunt School Data Collection Sheet

## **Student Details**

Please ensure that all sections are completed in BLOCK CAPITALS.

Students Surname		
Students LEGAL Surname (if different)		
Students Forename		
Students Middle Name(s)		
Students Chosen Name (if different)		
Date of Birth	G	Gender
Students mobile Number		
Students E-mail address		
Students Previous school		
Details of siblings already at JOG		
Home Address		
	Postcode	<b>)</b> :

## **Parent or Carer Details**

Parents and Carers will appreciate that the school has legal responsibilities for the care of, and access to, students and must be correctly informed of these details. Parents and Carers with Parental Responsibility are entitled, and will receive, communications including emails, reports and newsletters and have access to School Gateway our parent portal that gives information about attendance, personal details, reports, timetables, etc. Please note that one Parent or Carer must be Priority 1.

If you wish to receive all communications from the John of Gaunt School, please circle PRIORITY 1 If you do not wish to receive all communications from the John of Gaunt School, please circle PRIORITY 2

Parent or Carer	Relationship to Student:	Parental Responsibility (Please circle)	Yes	No
Title (Please circle)	Mr/Mrs/Ms/Miss/Dr/Other:	Priority (please circle)	1	2
First Name				
Surname Name				
Mobile Number				
Home Number				
Work Number				
E-mail address				
Home Address (if different from student)				

Parent or Carer	R	elati	onshi	ip to St	udent:	:					arental R Please cir		nsibility	Y	es	No
Title (Please circle)	М	lr/Mr	s/Ms/	Miss/Dı	/Othe	r:				Р	riority (p	lease	circle)	1		2
First Name										'						
Surname Name																
Mobile Number																
Home Number							,	Work N	umbe	r						
E-mail address																
Home Address (if different from student	t)															
Emergency Contacts Please keep us inform contacted in the event happy for them to colle Under the new K contact numbers	that yect and	our o	child r k afte	needs to er your c Iren sa	be loo hild if v	oke we	d after off are unable	site. We to cont	e will a tact Pa	assume arents o	that if your	u have n the f	e listed the irst instan	em, yo ce.	u ar	
		Ful	ll Nan	ne					R	elations Stude	-	Con	tact Telep	hone I	Num	bers
1 <sup>st</sup> Contact																
2 <sup>nd</sup> Contact																
Medical Information								•								
Medical Practice:																
Address:																
Medical Conditions o	r Disa	abilitie	es:													
Expected Method of T	ravel t	to Sc	hool													
Mode of Travel (Please circle)	/alk	Bicy	/cle	Car	Taxi		Car Share	Train		Public Bus	School I		School (with B		ss	Other
Meal Arrangements																
Please circle	Free School Meal Paid School Meal			al	Sa	ndwiches		Home		Oth	ner					
Other Information																
Please circle	S	ervic	e Fan	nily	Lo	oke	ed After	Adopt	ed LA	.C						

## Language Information

Main Lan	guage Spoken at Home		
ls English	an additional language for your child?		
If not Eng	lish, please state child's main language		
Religion		No religion	I do not wish to state

Data Protection: The school is registered under the Data Protection Act 2018 and the General Data							
Protection Regulation (GDPR) (EU) 2016/679 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 DfES.							
·							
Signature:	Date:						
<b></b>							

Remember – it is important to inform the school office immediately if any of these details change, as we may need to use this information to contact you in an emergency. Thank you.

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Eth	ш	JΙLΥ

Student's Name:					

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.* 

The DfE recommends that young people aged over 11 years old have the opportunity to decide their own ethnic identity. Parents or those with parental responsibility are asked to support or advise those children aged over 11 in making this decision, wherever necessary. Students aged 16 or over can make this decision for themselves.

Please study the list below and <u>tick one box only</u> to indicate the ethnic background of the student or child named above. Please also tick whether a parent or the student filled in the form.

White	Code	
□ [] White British	WBRI	
□ [] White Irish	WIRI	
□ [] White Traveller of Irish Heritage	WIRT	
☐ [] White Turkish / Turkish Cypriot	WTUR	
□ [] White Eastern European	WEEU	
□ [] White Western European	WWEU	
□ [] White Gypsy/Roma	WROM	
□ [] White other	WOTW	
Mixed		
<ul><li>[ ] White and Black Caribbean</li></ul>	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	
□ [] Nepalese	ANEP	
□ [] Other Asian	AOTA	
Black or Black British		
□ [] Black Caribbean	BCRB	
□ [] Black African	BAFR	
<ul><li>[ ] Any other Black background</li></ul>	BOTH	
Chinese		This information
• [ ] Chinese	CHNE	was provided by:
Any other ethnic background	OFIL	promaca ayr
<ul><li>[ ] Filipino</li><li>[ ] Japanese</li></ul>	OFIL	Parent [ ]
• [] Moroccan	OMRC	Student [ ]
• [] Thai	OTHA	
[ ] Any other Ethnic Group	OOEG	
No record to be made		

[ ] I do not wish an ethnic background category to be recorded

**REFU**