

Personal Information Record

Name: ______

Date of Birth: _____

This information booklet must be completed prior to your child starting school at Durham Lane Primary School to allow us to collect all necessary and relevant information. The information gathered will be stored securely in paper copy whilst your child is attending Durham Lane Primary and electronic information will be archived for a period of 5 years following the completion of Year 6. For full details of our data management procedures and privacy notice that comply with the GDPR (2018) please contact school.

For C	For Office use only					
Unique Pupil Number (UPN) Issue for children new to education/request from previous school						
Common Transfer Form requested from previous school	Yes / No					
Birth Certificate seen and recorded	Signature:	Date:				
Data input into SIMS database:	Signature:	Date:				
Consent information into database	Signature:	Date:				
Health questionnaire information into database	Signature:	Date:				
FSM/Pupil Premium Information received	Signature:	Date:				



DECLARATION Please read and sign the following declaration

I declare that I, the undersigned have parental responsibility for the named pupil and that I am therefore able to provide the information requested and that the information provided is accurate. I understand that it is essential for the school to have pertinent information to ensure the quality of care and safety for the pupil and that it is my responsibility to advise the school in writing of any changes in information as soon as reasonably possible.

I understand that all the information provided is used in line with ours and Stockton on Tees Borough Council's Fair Processing Notice which is available at http://www.stockton.gov.uk/disclaimer/education/ .

Signed:

Printed Name:	Date:
All data provided will be held in strictest confi	dence under the provisions of GDPR Act 2018



	S SECTION IS FOR BASIC INFORM are entitled to access information We will need to see documentary	about their child unless there	
Child's Legal Forename		Child's Legal Surname	
Preferred Forename		Preferred Surname	
Middle Names			
Date of Birth		Gender	MALE/FEMALE (please delete as appropriate)
Address			

Start Date:		



PARENTAL DETAILS

Please note parent with parental responsibility are entitled to access information about their child unless there is a legal order in place. We may require documentary evidence to support this if queries arise.

Parent/carer Title:		Parent/carer's relationship:	
Parent/carer Full Name			
Parent/carer Full Address including postcode			
Mobile number		Home number	
Work number		Other	
Email address			
Does this person have full parental responsibility?	YES NO	Does this parent have residential care?	YES NO
Is this parent a priority contact?	YES NO	Are there any legal orders in place re this parent?	YES NO
Is this parent a member of H	er Majesty's Armed Forces?	YES	NO

Parent/carer's Title:			Parent/carer's relationship:		
Parent/carer's Full Name					
Parent/carer's Full Address including postcode					
Mobile number			Home number		
Work number			Is this parent a priority contact?	YES	NO
Email address					
Does this person have full parental responsibility?	YES	NO	Does this parent have residential care?	YES	NO
Is this parent a priority contact?	YES	NO	Are there any legal orders in place re this parent?	YES	NO
Is this parent a member of Her Majesty's Armed Forces?			YES	NO	



OTHER EMERGENCY CONTACT INFORMATION						
Contact priority number	1	Relationship to pupil				
Contact's Title:	Mr/Miss/Mrs/Ms/Other- please give details please delete as appropriate)					
Contact's Full Name						
Contact's Full Address						
including postcode						
Mobile number		Home number				
Work number						
Email address						
Does this contact have full parental responsibility?	YES/NO (please delete as appropriate)	Does this contact have residential care?	YES/NO (please delete as appropriate)			

Contact priority number	2	Relationship to pupil				
Contact's Title:	Mr/Miss/N	Ars/Ms/Other- please giv please delete as appropriate)	ve details			
Contact's Full Name						
Contact's Full Address						
including postcode						
Mobile number		Home number				
Work number						
Email address						
Does this contact have full parental responsibility?	YES/NO (please delete as appropriate)	Does this contact have residential care?	YES/NO (please delete as appropriate)			

Contact priority number	3	Relationship to pupil				
Contact's Title:	Mr/Miss/Mrs/Ms/Other- please give details please delete as appropriate)					
Contact's Full Name						
Contact's Full Address						
including postcode						
Mobile number		Home number				
Work number						
Email address		·				
Does this contact have full	YES/NO	Does this contact				
parental responsibility?	(please delete as appropriate)	have residential	YES/NO			
		care?	(please delete as appropriate)			



SCHOOL MEALS

In Durham Lane Primary children have several options during the lunch period; school lunch or packed lunch.

School Meals are cooked daily on the premises and we operate a 'daily choice menu'. This means that children staying for school lunch must select their lunch choice from a given selection when at the school hatch. Each day the lunch menu will offer a range of foods including meat, vegetarian and cold options. There are also a selection of desserts for children to choose from each day. At present the cost of school meals is £2.05 a day (£10.25 weekly) but children in Reception, Year 1 and Year 2 are entitled to a free school meal as part of the government's Universal Infant Free School Meals scheme.

A copy of the lunch menu is available on the school website. Additional copies can be obtained from the main school office. We ask parents pay lunch money using cash or cheque on a weekly, monthly or termly basis. Any meals which are not taken will be credited to the child's lunch account.

PACKED LUNCHES

Parents may prefer their child to have a packed lunch. This should be in a rigid plastic container or lunch box carrier and must be clearly marked with your child's name. We have a <u>school policy</u> offering guidance on the content of packed lunches available on the school website but we strongly request that no glass bottles, canned drinks, sweets, fizzy drinks, nuts or chocolate are included in packed lunches.

	DIE	TARY NE	EDS	
□ Artificial colouring Allergy				
□Gluten Free				
□Halal				
□Kosher Foods Only				
□No diary produce				
□No nuts of any type/quantity	/			
□No pork				
□ Seafood allergy				
□Other – please give details				
Meal Arrangement Choice				
Paid Meal 🛛	Free School Meal		Packed lunch	Home 🗌



FREE SCHOOL MEALS AND PUPIL PREMIUM

THIS SECTION IS RELATES INFORMATION REQUIRED TO ENSURE MAXIMUM FUNDING OPPORTUNITIES FOR YOUR CHILD

(Please note if preferred this section can obtained separately and sent directly to Stockton-On-Tees Borough Council's Free School Meal Department at PO Box 228 Municipal Buildings, Church Road, Stockton on Tees TS18 1XE)

Registering for free school meals could raise an extra £1,320 for your child's school, to fund valuable support like extra tuition, additional teaching staff or after school activities.

This additional money is available from central government for every child whose parent is receiving one of the welfare benefits listed in the form. It is therefore important to sign up for free school meals, even if your child is in reception, year 1 or year 2, so that your child's school receives as much funding as possible.

You can register your child for Free School Meals if you get any of these benefits:

- Income Support
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance
- Support under Part VI of the Immigration and Asylum Act 1999
- The Guarantee element of State Pension Credit
- Child Tax Credit, provided they are not entitled to Working Tax Credit and have an annual income (as assessed by HM Revenue & Customs) that does not exceed £16,190
- Working Tax Credit 'run-on' the payment someone may receive for a further four weeks after they stop qualifying for Working Tax Credit

For parents who may be eligible, registering is really quick and easy either contact the Free School Meals Team at Stockton Borough Council on **01642 526606** who will help you to register or ask a member of the office staff for advice. There are many benefits of this for your child in addition to the free meal (which may save you more than £350 a year). Extra benefits include an additional £1320 pupil premium funding allocated to the school which is used to support your child's learning. If you don't want your child to have the school meals they can continue their lunchtime routine as normal – as long as you qualify and are registered, the school still gets £1320 extra. No one will know you have registered and it will not affect any other benefits you are claiming.

If you think you may be eligible please complete the next section.

The information you provide in this form is confidential but will allow us to support a claim for free school meals if you are eligible. You only need to complete this form once and it will last for the duration of your child's time at their current school but if circumstances change please make us aware.

FAMILY INCOME AND BENEFIT DETAILS

ls v	/our i	joint family	v income	over f16	.190 per	vear? (Please	place an	X in the a	appro	oriate l	box).
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Yes

No

If you have ticked yes, you do not need to complete the next section and can go straight to the declaration on the next page.

If you ticked no, please place an X in this box if you are in receipt of any of the benefits listed below: \Box

- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support from NASS (National Asylum Support Service) under part 6 of the Immigration and Asylum Act 1999
- the guarantee element of State Pension Credit
- Child Tax Credit (with no Working Tax Credit) with an annual income of no more than £16,190
- Working Tax Credit run-on
- Universal Credit



Please place an X in t	his box if you are not sure whether your joint family income is over £16,190, or whether you
are in receipt of one of	of the benefits listed above, but you would still like us to check whether your child is eligible for
free school meals:	

DECLARATION

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for free school meals. I also agree to notify the local authority in writing of any change in my family's financial circumstances as set out in this form.

Signature of Parent/guardian		Date	
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HEALTH

We are committed to making sure that school is a happy and successful experience for all of our children and young people. Where a child has a particular difficulty or need, we will do our best to put measures in place to overcome this. It would therefore be helpful if you could complete this questionnaire, whether or not your child has any difficulties.

We will treat what you have told us here sensitively.

None of the information will be shared with other parents or pupils.

If you need help to answer any questions please let us know.

What Happens To The Information You Give Us?

Information will be used by the school to promote the wellbeing of your child.

No information will be published that would identify your child.

Information will be shared with those staff in the school who support your child unless you ask us not to below.

Is there any person in the school who you would not like to share this information with?

Please name them:

MEDICAL PRACTICE INFORMATION		
Name of Doctor		
Doctor - Medical Practice Address		
Telephone Number		

1. Please indicate whether your child has any long-standing illnesses, health problems or disabilities which mean that they have substantial difficulties with any of the areas of his/her life shown below? Please select all that apply. By long-standing we mean anything that has troubled them over a period of at least 12 months or that is likely to affect them over at least 12 months. Please exclude difficulties that you would expect for a child of that age

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Mobility – moving around indoors or outdoors	
Hand movements – touching or holding	
Personal care – going to the toilet, dressing	
Eating and drinking without help	
Incontinence – wetting or dirtying	
Taking medication	
Learning – numbers, letters, words	
Behaviour – very active, has a short attention span, behaves unacceptably	
Has fits or seizures	
Diagnosed with autism or Asperger Syndrome	
Has a life-limiting condition or requires palliative care	
Can be depressed, or anxious, or has an eating disorder	
Other (please describe other areas of great difficulty):	

2. Does your child take any medication, use any physical aids or require any special diet or supplements?

Yes No

Yes No

3. If your child did not take this medication, use this physical aid or has a special diet or supplements, would he/she have substantial difficulties with any of the areas of life listed above?



4. If you have indicated above that your child has difficulties, do these difficulties affect his or her:	Yes	Sometimes	No	Don't know
Classroom learning?				
Interaction with his or her classmates / peers?				
Joining in other school activities e.g. breaks, social and leisure activities?				
Attendance at school				
Day to day life outside of school				

5. Hearing		
Has your child ever had their hearing tested?	Yes	No
What was the result?		
Does your child have a history of hearing difficulties/ear infections?	Yes	No
Does your child wear grommets?	Yes	No
Does your child wear a hearing aid?	Yes	No
6. Vision		

Has your child ever had their eyesight tested?	Yes	No
What was the result?		
Does your child wear spectacles?	Yes	No

7. Asthma (please ask for a copy of the school asthma policy and procedures)		
Does your child have Asthma?	Yes No	
Use of emergency Salbutamol inhaler		
In the event of my child displaying symptoms of asthma, and if their inhaler is not	Yes No	
available or is unusable, I consent for my child to receive salbutamol from an	Tes No	
emergency inhaler held by the school for such emergencies.		
Do they need prescribed medication/inhaler for this? Please give details		

8. Hay Fever		
Does your child have Hay Fever?	Yes	No
Do they need prescribed medication for this?		

9. Allergies (please ask for a copy of the school allergies policy and procedures)				
FOOD ALLERGIES	Х	OTHER ALLERGIES	х	
Nuts		Plasters		
Dairy		Antiseptic Wipes		
Seafood		Bee Stings		
Other (Please Specify):		Other (Please Specify):		
Does your child need any medication for the any of the above? Yes / No (please delete) If yes please detail				
Does your child have an Epi Pen for any of the above? Yes / No (please delete) If yes please detail				

10. Speech and Language Development			
Does your child have any issues with speech and language development?	Yes	No	
Have they ever been assessed by Speech and Language Therapy?	Yes	No	
What was the result?			
Does your child attend Speech Therapy?	Yes	No	



11. Emergency First Aid		
Is your child allergic to sticking plaster?	Yes	No
May we administer sticking plaster for minor first aid injuries?	Yes	No

12. Other Medical Information – if you indicate any conditions below, we will contact you for further information	x
Epilepsy	
Diabetes	
Eczema	
ADHD	
ADD	
Coeliac disease	
Other (Please Specify):	
Please use this space to inform of us any other medical information that you may feel is relevant but not cover questions:	ed by the earlier

Is your child under any medical treatment at present?	Yes	No
Is your child being seen or assessed by any other agency or medical professional?	Yes	No
Has your child ever had a serious accident?	Yes	No
Has your shild over experienced any emotional trauma? Describe briefly any traumatic		
	Yes	No
Has your child ever experienced any emotional trauma? Describe briefly any traumatic events that your child has experienced (for example: death of close relative, divorce, family crisis, etc.)?	Yes	No

15. Are your child's vaccinations are up to date including tetanus:

16. If your child has complex needs, what sort of help or special equipment do you think your child may need so that they get on well at school?

17. We would be pleased to meet with you to talk about your child's needs. Please contact school or indicate below if you would like us to arrange this.

Please note children are not permitted to bring medication into school.

- All medication used in school must be delivered and signed in by an adult and a medicine authorisation form must be completed and signed by a parent and must comply with the School Medicine Policy terms.
- Only prescribed medication in the original container can be dispensed please see the medicine policy or advice or ask at the school office.
- All medicines can only be collected by an adult that has been nominated by the person with parental responsibility.



GENERAL BACKGROUND INFORMATION				
Please note that these are mandatory fields on our database, should you wish not answer please select the 'Information refused' option, so we can complete data entry.				
Ethnicity	 Any other Asian Background Any other black background Any other ethnic group Any other mixed background Any other white background Bangladeshi Black Caribbean Chinese Gypsy Gypsy Roma Indian Pakistani Roma Traveller of Irish heritage White British White and Asian White and black African White and black Caribbean 	Information Refused		
Looked After Child		Information Refused		
Adoption Adopted from care under the Adoption and Children Act 2002 or has left care under a Special Guardianship or Residence Order		Information Refused		
Service Pupils with parents who are members of the armed forces or in receipt of a child pension from the Ministry of Defence.		Information Refused		
First Language spoken		Information refused		
Other Languages spoken/understood		Information refused		
Is English an additional Language?		Information refused		
Religion		Information refused		
Travel arrangements:	Bus School Bus Car Ta	axi Walk Cycle 1	Train	



Other (please specify):



PERMISSIONS AND CONSENTS FOR GENERAL ACTIVITIES IN SCHOOL

Please help us by completing all the boxes and returning the whole form to school.	Permission	Permission
All permissions will be active for the time the child is registered with the school and in the case of	granted	declined
the use of images for 6 years after they have left.		
RESPONSIBLE USE OF THE INTERNET	_	_
User Agreement IT and the use of IT play an important role in children's learning in school. As part of the school's IT programme we offer pupils supervised access to the Internet and email. In order to reduce the risk of accidentally accessing inappropriate material, the school employs a filtering system that restricts access to inappropriate materials or undesirable sites. Whilst every endeavour is made to ensure suitable restrictions are in place we cannot be held responsible for the nature or content of all		
materials accessed through the Internet. The school has further details guiding Internet use and follows a safe code of conduct. The school also has an e-safety Policy and Mobile Phone use policy which are available to parents on request.		
I understand that my child will use the Internet at school. I understand that the school will take all reasonable precautions to ensure that my child does not gain access to inappropriate material. I understand that pupils will be held accountable for their own actions.		
VISITS TO LOCAL DESTINATIONS	_	_
We sometimes organise visits to local destinations, such as the churches, shops or walks around the locality, to enhance the children's learning. You will be informed of all such visits prior to them taking place, but we will not seek further written consent. Risk assessments are always carried out and there is always adequate adult supervision. (Consent forms for all visits requiring transport and of longer than half a day's duration will be sent out separately for each trip).		
I give permission for my child to be taken on a visit to a destination within walking distance of the		
school for no more than half a school day. I understand that the school will take all reasonable		
precautions to ensure my child's safety.		
USING IMAGES OF CHILDREN There will be occasions when your child is photographed or filmed taking part in school activities. We seek your permission to use your child's image for display on a number of publicity materials, social media, school website and internal display opportunities within the school.		
Please Tick each box as appropriate or tick on the right if you agree to all I give permission for my child's image and work to be used for promotional purposes in documentation such as in the school prospectus, internal TV screens or to accompany newspaper articles.		
 I give permission for my child's image and their work to be used on the school website I give permission for my child's image and work to be used on Twitter/Facebook. I give permission for my child's image and their work to be used in display around school. 		
***Please note if names are used to accompany an image only the child's forename will be used.		
<u>Local Press</u> We are proud to be a very successful school in many different areas. Last year we were contacted by local press about many different events and activities where our school had excelled. We anticipate that in the future we may well appear in the press again! If you give permission for your child's picture to appear in local press releases, please give consent here. (<u>Please note:</u> we will not release children's names to the press without seeking further consent from you. Most publication groups including Gazette Media have for many years made published photographs available for purchase via their offices and now also via their website).		
Consent for Visits and Off-site Activities Specific written parental consent will not be requested from you for localised off-site activities in school – for example, year-group visits to local amenities such as the local park, library, shopping centre, church etc. These activities are part of the school's curriculum and take place during the normal school day.		



I give permission for my child to:	
a) Take part in localised school trips and other activities that take place off school premises; and	
b) Be given minor first aid or urgent medical treatment during any school trip or activity.	
Please note the following important information before signing this form:	
• The trips and activities covered by this consent include;	
 all visits off-site which take place adventure activities at any time off-site sporting fixtures within the school day, We will send 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.	
THE USE OF VIDEO CLIPS AND IMAGES RATED PG	
We like to make use of modern technologies throughout the curriculum and sometimes take the opportunity to use feature films and associated resources for education or enrichment activities. There are occasions when the materials may have been classified PG. We ask for your permission to use PG rated films that we deem to be acceptable for the age, maturity and well-being of your child.	
I give permission for my child to watch films and clips that have a PG classification.	
Use of the Timber Activity Trail	
As you are aware we have a timber activity trail installed onto the school premises. This is for use by children under the strict supervision of a member of staff employed by the school. The equipment is perfectly safe but is designed to be challenging for children from the ages of 4 to 11 years. Children must only access this equipment during the school day when accompanied by an employee of the school and not at any other time. Parents are asked to ensure that their children do not access the equipment, thereby ensuring their safety whilst waiting on the yard at the start and end of the school day.	
I give permission for my child to be able to access the Timber Activity Trail under the supervision of an employee of Durham Lane Primary School.	



Please complete this section ONLY if your child is starting Nursery

We request that Durham Lane Primary School will provide 15 hours free nursery education my child.

My child is claiming the free entitlement maximum 15 hours per week in line with the morning nursery option.					
I confirm that my child will access 15 hours per week over days at Durham Lane Primary School.					
Please indicate which days you	ur child will be at	tending the setting	g:		
Days	Mon	Tues	Wed	Thurs	Fri
(please tick box)					
I confirm that my child another Local Authority.	l does not acces	s a free place wit	h another Stockt	on-On-Tees provi	der or with a provider in
Please tick to show that you a	gree with the fol	lowing conditions	of the grant.		
Lunderstand	that I cannot be	charged for the 15	5 hours Free Nurse	erv Entitlement	
		-		-	ble for my child.
L I have received detailed information from this provider of additional services available for my child. The details I have given on this form are true. I understand that any false or incorrect information could lead to the free place being withdrawn.					
Parent/carer					
Signature Date					
Contact Number					
This agreement will remain in place until the child enters full-time education but under certain circumstances can be amended or broken, below are some cases when this may apply: -					
 If the family leaves the area. If the family's circumstances change i.e. a new job/unemployment The child has a long term sickness To accommodate changing shift patterns Provision not appropriate to the child's needs 					



Please complete this section ONLY if your child has previously attended another school/s or Nursery provision

Previous School Attended	Head Teacher	
Address	Attended from and to:	
Reason for leaving		

Previous School Attended	Head Teacher	
Address	Attended from and to:	
Reason for leaving		

Previous School Attended	Head Teacher	
Address	Attended from and to:	
Reason for leaving		<u>.</u>