



UPN Number:
 Interview date:
 Class:
 Start Date:

EARLHAM PRIMARY SCHOOL ADMISSION FORM

STUDENT INFORMATION – ALL SECTIONS TO BE COMPLETED

The information on this form is processed electronically for administrative purposes and is subject to the terms of the Data Protection Act 1984. Please provide a copy of your child's birth certificate with this form together with proof of address (no more than 3 months old)

Surname		Gender (M/F)	
Forenames	<i>Please underline names by which the student is usually known</i>		
Date of Birth <small>Birth certificate seen? YES/NO</small>			Country of Birth
Permanent Home Address Including Postcode			
Temporary Address Including Postcode			
Reasons for temporary address			
Home Tel. No.		Local Education Authority	
Previous School including address			
Dates & reasons for extended absence from school			
Parent Details:	PARENT 1	PARENT 2	
Family Name			
Forename(s)			
Home address (if different from Pupil's)			
Main Language			
Do you require an interpreter?			
Occupation			
Work Tel. No			
Mobile etc.			
E-Mail address			

Emergency Contact 1	Full Name		Tel. No.	
	Relationship to Child			
Emergency Contact 2	Full Name		Tel. No.	
	Relationship to Child			
Emergency Contact 3	Full Name		Tel. No.	
	Relationship to Child			
Emergency Contact 4	Full Name		Tel. No.	
	Relationship to Child			

Lunch Arrangements <i>Please tick one</i>	Packed Lunch	
	School Meal (paid)	
	Entitled to Free School Meal	
Does your child have any dietary requirements (e.g. vegetarian / no pork etc.)		

Doctor's Full Name		Gender	MALE / FEMALE
Surgery Name			
Full Address & Telephone Number			

MEDICAL INFORMATION	
Please circle relevant conditions -	
Asthma	
Eczema	
Eye problems	
Hearing problems	
Speech problems	
Hay Fever	
Allergies (specify) _____	
Sickle cell	
Other (specify) _____	
Does your child require medication to be administered at school? Please note you will be required to complete additional paperwork if you have indicated yes.	YES NO
Are there any other agencies involved with your child? If yes, which ones? (eg Speech and Language Therapist, Social Services, Education Welfare Officer)	

Brothers and Sisters at Earlham Primary School	
Name	Class

HARINGEY COUNCIL ETHNIC MONITORING LIST

Ethnic Category: (please tick ONE box only)

Afghan		Malay	
African Asian		Malaysian Chinese	
Albanian		Mirpuri Pakistani	
Arab		Moroccan	
Asian and any other ethnic group		Nepali	
Asian and Black		Other Asian	
Asian and Chinese		Other Black	
Bangladeshi		Other Black African	
Black – Angolan		Other Chinese	
Black – Congolese		Other ethnic group	
Black – Ghanaian		Other mixed background	
Black – Nigerian		Other Pakistani	
Black – Sierra Leon		Other White British	
Black – Somali		Polynesian	
Black – Sudanese		Portuguese	
Black and any other ethnic group		Refused	
Black and Chinese		Serbian	
Black Caribbean		Singaporean Chinese	
Black European		Sri Lankan Other	
Black North American		Sri Lankan Sinhalese	
Bosnian-Herzegovinian		Sri Lankan Tamil	
Chinese		Taiwanese	
Chinese and any other ethnic group		Thai	
Croatian		Traveller of Irish heritage	
Egyptian		Turkish	
Filipino		Turkish Cypriot	
Greek		Vietnamese	
Greek Cypriot		White	
Gypsy/Roma		White – Cornish	
Hong Kong Chinese		White – English	
Indian		White – Irish	
Information not yet obtained		White – Scottish	
Iranian		White – Welsh	
Iraqi		White and any other Asian Background	
Italian		White and any other ethnic group	
Japanese		White and Black African	
Kashmiri Pakistani		White and Black Caribbean	
Kashmiri other		White and Chinese	
Korean		White and Indian	
Kosovan		White and Pakistani	
Kurdish		White Eastern European	
Latin/South/Central American		White European	
Lebanese		White Western European	
Libyan		Yemeni	

Information provided by
(please tick ONE box)

Parent/Guardian	
Pupil	

Languages Spoken at Home

Parent 1
Parent 2

ALL SECTIONS TO BE COMPLETED

Are you Asylum Seekers (that is an application for Asylum has been made but at this stage is not granted)?			
<i>Tick the appropriate box</i>			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

What is your child's religion?			
<i>Tick the appropriate box</i>			
Baptist		Hindu	
Buddhist		Jewish	
Catholic		Muslim	
Christian		No Religion	
Church of England		Orthodox	
		Other Religion	
		Rastafarian	
		Refused	
		Roman Catholic	
		Sikh	

Travel Arrangements <i>Please tick ONE only</i>	Walk		Taxi	
	Car		Bicycle	
	Bus		Tube/Train	
	Cycle		Car share (with another family)	
	Other			

STATISTICAL REQUIREMENTS – PLEASE COMPLETE/DELETE AS APPROPRIATE

CHILD'S NATIONALITY	CHILD'S COUNTRY OF BIRTH	CHILD'S DATE OF UK ENTRY (if not resident in U.K. all life)
Child		
NATIONALITY		
Parent 1		
Parent 2		

Student's position in Family e.g. 2/4	
Person(s) responsible for student at Home (Please tick appropriate box/boxes)	
Parent 1	
Parent 2	
Parent 1 & 2	
Other(s) <i>Please give details</i>	

Number of years educated in English if English is not first language	<input type="checkbox"/> 2 Years or less <input type="checkbox"/> 2 Years or more
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I give permission for my child to be photographed during school activities

I give permission for my child to take part in educational visits in the local area

Is there any other information you would like to share?

DECLARATION

I confirm/verify that the information I have given is accurate to the best of my knowledge.

Signed: *Parent/Carer*

Date: