## HEAMOOR C.P. SCHOOL

Bosvenna Way, Heamoor, Penzance, TR18 3JZ Telephone: 01736 364868 Fax: 01736 331603

Email: secretary@heamoor.cornwall.sch.uk

## CAPITA SIMS.NET (SCHOOLS INFORMATION MANAGEMENT SYSTEM) ADMISSION FORM

(Please note: This application form does not constitute an offer of admission)

Please complete all sections except Section B which is for Office Use Only.

CONFIDENTIALITY: The information given below will be maintained on the school's data base to which no unauthorised person shall have access and will be subject to strict control under the Data Protection Act.

Name of Parent/s .....

(Full individual details to be included in the contact area of Section D)						
Section A - Basic Pu	ıpil Details	· · · · · · · · · · · · · · · · · · ·			- <del>11</del>	
Legal Forename:	Legal Surname					
Middle Name(s):		Preferred Surname:				
Preferred Forename::		Date of Birth:				
Age at Admission:		Gender: Male/Female				
Previous Surname:	······					
Brothers/Sisters (including half/step brothers and sisters)  Please list in age order any siblings who are currently at this school.						
Surname	Forenames	Gender	Date o	f Birth	Same Addre	ess
		Female/Male	. /	1	√ / x	-
		Female/Male	/	1	√ / x	
		Female/Male	1	1	√ / x	
,		Female/Male	1	7	√ / ×	
Section B - Registrat	tion (Office Use Only)	<del></del>	<u> </u>			<del></del> ↓
		House: Year Taught In:		Vigan	Lesson and the second s	.:
Year Group: Enrolment Status:		Admission Date		egggestere		
Admission Number: Attendance Mode: AM / PM / ALL DAY						
UPN: Part Time Dates:/fo/				fo/	*****	
Birth Certificate Seen:   Name Change Documents Seen:						
Quick Note Information (e.g. SEN, or any other pertinent note)						
******************		**************			*************	••••

Confidential

Section C - Pupil Address					
Postcode:	House Number/Name:				
Street:	Town/City:				
Tel: Home/Mobile:	E-mail:				
Section D - Family/Home					
Contact 1					
Title: Forename:	Surname:				
Postcode:	House Number/Name:				
Street:	Town/City:				
Relationship: ☐ Mother ☐ Father ☐ Ste ☐ Other Relative ☐ Neighbour ☐ Other	p Parent □ Foster Parent □ Grandparent ner Contact □ Guardian □ Social Worker				
☐ Parental Responsibility ☐ Co  Tick one telephone number as the Main Day Time num  Telephone: Home:	ber for use in emergency				
Mobile:Main.□	Other: Main.□				
Contact 2					
Title: Forename:	Surname:				
Postcode:	House Number/Name:				
Street:	Town/City:				
Relationship: ☐ Mother ☐ Father ☐ Ste	p Parent □ Foster Parent □ Grandparent ner Contact □ Guardian □ Social Worker				
☐ Parental Responsibility ☐ Court Order  Tick <b>one</b> telephone number as the <b>Main Day Time number</b> for use in emergency					
Telephone: Home:Main.□	Work:Main.□				
Mobile:Main.□	Other: Main.□				
Contact 3					
Title: Forename:	Surname:				
Postcode:	House Number/Name:				
Street:	Town/City:				
Relationship: ☐ Mother ☐ Father ☐ Ste	ep Parent   Foster Parent   Grandparent  her Contact   Guardian   Social Worker				
☐ Parental Responsibility ☐ Court Order  Tick one telephone number as the Main Day Time number for use in emergency  Telephone: Home:					
Mobile:	Other:Main.□				

Section D (continued) Contact 4				
Title: Forename:	• • • • • • • • • • • • • • • • • • • •	Surnar	ne:	
Postcode: House Number/Name:				
Street:	• • • • • • • • • • • • • • • • • • • •	Town/City:	· · · · · · · · · · · · · · · · · · ·	••••••
Relationship: ☐ Mother ☐ F				ent □ Grandparent □ Social Worker
☐ Parental Responsib  Tick one telephone number as the Ma  Telephone: Home:	in Day Time nui	<b>mber</b> for use in e <mark>r</mark>	mergency 	Main.□
Mobile:	Main.□	Other:		Main.□
Section E - Pupil Medical Infor	mation:	<del></del>		
Medical Practice:	*******************************			al colouring allergy
Practice Address:		(if applicable)	☐ Koshe	r foods only
	***************		☐ No nut	ry produce s of any type/quantity
Telephone:			☐ No poi ☐ Ramae ☐ Seafoo	dan
Doctor's Name:	***********		☐ Vegeta	
Emergency Medical Consent: □				
Medical Conditions/Information: Pleas medications regularly taken. (If you real from please state NONE.				
Section F - Pupil Ethnic/Cultura	al Information	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	**********	
The school is required by law to provide will not use this information for any other		you give in this s	ection to th	ne DfES. The school
Ethnicity: (Data Source:	☐ Parent	□ Pupil	☐ Other)	Variable III and the second se
<ul> <li>□ White – Cornish</li> <li>□ Traveller of Irish Heritage</li> <li>□ White and Black Caribbean</li> <li>□ Any Other Mixed Background</li> <li>□ Bangladeshi</li> <li>□ Black – African</li> <li>□ Any Other Ethnic Group</li> </ul>	☐ Other White British☐ Gypsy/Roma☐ White and Black African☐ Indian☐ Any Other Asian Backgroun☐ Any Other Black Backgroun☐ Refused☐ Refused☐		☐ Pakistani nd☐ Black Caribbean	
First Language: ENGLISH	IER (please spec	ify)		
Asylum Seeker:   Refuge	ee Status: □	Travelle	r Status:	
Religion:  Anglican Hindu Muslim	☐ Buddhist☐ Jewish☐ No Religion			Christian Methodist Other Religion

☐ Roman Catholic		□ Sikh			
Section G - Pupil Add	itional Info	rmation:			
Meals: □ Free Meal □ School Meal		☐ Home	☐ Sandwiches		
== =:0,0,0		☐ Public Transport ☐ Walks	☐ School Coach		
Section H - Pupil Scho	ool History	rs.			
Name & Address of Previou	us School:				
Telephone:		Dates Attended:		,	
Section I - Court Ord	ers				
If the pupil is subject to any Court Orders please specify the Court Order terms below. This information is CONFIDENTIAL but will help the school under the pupil's position. A copy of any Court Orders will need to be provided.					
***************************************			••••••		
	*************				
Section J - Use of Ime	ages Cons	ent :			
In order to comply with the Data Protection Act 1998, the School needs your consent before taking photographs or making video recordings of your child for purposes which are not part of its core activities. We should be grateful if you could answer all the following questions.					
Conditions of Consent have been explained on the separate sheet of Explanatory Notes.					
I agree that the School can take photographs of my child which may be used in School Literature Yes/No (e.g. the School newsletters; the School's brochure and other promotional material etc.).					
I agree that the School can us can be viewed across the wor	se images of my	y child on its web site. (Pl	ease note the web site	Yes/No	
I agree that the School can us	se images of m	y child in video recordings	to promote the School.	Yes/No	
I agree that the School can ta School's own records, archive	ke photograph:	s and make video recordir	ngs of my child for the	Yes/No '	
I agree that my child can apport CD roms which the School mat the school to raise funds for	ay make of Sch	nool events and which it m	f photographs stored on ay sell to parents of children	Yes/No	
I am happy for the press to ta	ke and use ima	ages of my child.		Yes/No .	
The School may give the pre- for publishing with the child's	ss the first nam photograph in	e/first <u>and</u> surname ( <i>delet</i> a newspaper or for captio	te as appropriate) of my child ning on television.	Yes/No	
Section K					
I confirm that the above information is true and accurate. I undertake to inform the school if any of the above details change. I understand that this form does not constitute an offer of admission by the school.					
Signed:			Date:	<u> </u>	