

### Queensgate Foundation Primary School

Beatrice Avenue East Cowes Isle of Wight PO32 6PA
Tele: (01983) 292872
Headteacher – Mrs. S. Sillito
Chair of Governors – Mr. L. Atchison-Warne

PLEASE COMPLETE ALL SECTIONS OF THIS FORM AND SUBMIT IT ELECTRONICALLY TO THE SCHOOL ADMIN TEAM - office@queensgateprimary.co.uk

AN ORIGINAL COPY OF YOUR CHILD'S BIRTH CERTIFICATE MUST BE SHOWN TO A MEMBER OF THE OFFICE ADMIN TEAM BEFORE YOUR CHILD ATTENDS SCHOOL

### **PUPIL INFORMATION**

| FORENAME:                   | LEGAL SURNAME:                         |
|-----------------------------|--|
| MIDDLE NAME(S):             | GENDER                                 |
| ADMISSION DATE:             | CLASS YEAR:                            |
| ADDRESS INCLUDING POSTCODE: | Name of previous school if applicable: |
|                             | Telephone Number of previous school:   |

### **PUPIL MEDICAL DETAILS**

| DOCTOR:   | TELEPHONE NO:   |
|---|---|
| SURGERY ADDRESS:  |   |
|   |   |
| KNOWN MEDICAL CONDITION/S   | PLEASE STATE ANY MEDICATION/DOSAGE FOR THESE CONDITIONS OR ALLERGIES: |
| PLEASE INCLUDE ALL ALLERGIES):  | FOR THESE CONDITIONS OR ALLERGIES:                                    |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| *If your child has no known medical conditions or allergies, please write NONE here | *   |



TITLE:

**FORENAME:** 

**SURNAME:** 

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### PARENT INFORMATION – \*Please cross out whichever Yes/No answers do not apply

**HOME TELE:** 

**MOBILE NO:** 

**DAYTIME TELE:** 

| EMAIL ADDRESS:                        |  |
|---------------------------------------|--|
| ADDRESS (if different to child's)     |  |
|                                       |  |
|                                       |  |
|                                       |  |
| RELATIONSHIP TO CHILD:                | *PARENTAL RESPONSBILITY: YES / NO        |
| *IS THERE A COURT ORDER? YES / NO     | DOES THE CHILD LIVE WITH YOU: YES / NO   |
| IF YES, PLEASE PROVIDE A COPY TO THE  |  |
| OFFICE                                |  |
|                                       |  |
| PARENT INFORMATION – *Please cross ou | ıt whichever Yes/No answers do not apply |
|                                       |  |
| TITLE:                                | HOME TELE:                               |
| FORENAME:                             | DAYTIME TELE:                            |
| SURNAME:                              | MOBILE NO:                               |
| EMAIL ADDRESS:                        |  |
| ADDRESS (if different to child's)     |  |
|                                       |  |
|                                       |  |
|                                       |  |
| RELATIONSHIP TO CHILD:                | *PARENTAL RESPONSBILITY: YES / NO        |
| IS THERE A COURT ORDER? YES / NO      | DOES THE CHILD LIVE WITH YOU: YES / NO   |
| IF YES, PLEASE PROVIDE A COPY         |  |
|                                       |  |



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PERSON(S) TO BE CONTACTED (IN ORDER OF PRIORITY) IF PARENTS ARE NOT AVAILABLE DURING SCHOOL HOURS. THESE PERSONS MAY BE ASKED TO COLLECT YOUR CHILD FROM SCHOOL IF YOU ARE NOT AVAILABLE.

Please read and sign the GDPR agreement at the end of this form

| TITLE:                            | HOME TELEPHONE NO: |
|-----------------------------------|--------------------|
| FORENAME:                         | DAYTIME PHONE NO:  |
| SURNAME:                          | MOBILE NO:         |
| ADDRESS (if different to child's) |                    |
|                                   |                    |
|                                   |                    |
| RELATIONSHIP TO CHILD:            |                    |
| 2                                 |                    |
| TITLE:                            | HOME TELEPHONE NO: |
| FORENAME:                         | DAYTIME PHONE NO:  |
| SURNAME:                          | MOBILE NO:         |
| ADDRESS (if different to child's) |                    |
|                                   |                    |
|                                   |                    |
| RELATIONSHIP TO CHILD:            |                    |
|                                   |                    |
| 3                                 |                    |
| TITLE:                            | HOME TELEPHONE NO: |
| FORENAME:                         | DAYTIME PHONE NO:  |
| SURNAME:                          | MOBILE NO:         |
| ADDRESS (if different to child's) |                    |
|                                   |                    |
|                                   |                    |
| RELATIONSHIP TO CHILD:            |                    |



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### **ADDITIONAL INFORMATION**

| SPECIAL DIETARY NEEDS: IS YOUR CHILD VEGETARIAN?   |                   |       | Yes      |  | No |
|--|-------------------|-------|----------|--|----|
| ARE YOU IN RECEIPT OF ANY BENEFITS THAT MAY YOUR CHILD TO FREE SCHOOL MEALS?   | ENTIT             | LE    | Yes      |  | No |
| IF YOUR CHILD IS TRANSFERRING FROM ANOTHER AND IS IN YEAR 3/4/5 OR 6 IS HE/SHE CURRENTLY R FOR FREE SCHOOL MEALS?  |                   |       | )<br>Yes |  | No |
| Please do apply for Free School Meals if you think you are eligible; the school receives Pupil Premium for all children registered for Free School Meals so it is important to apply, regardless of whether he/she receives them automatically because they are in Reception, Year 1 or 2. |                   |       |          |  |    |
| RELIGION (If none, please state NONE below)  | FIRST Language:   |       |          |  |    |
|  | НОМІ              | E Lan | guage:   |  |    |
|  | Yes               |       | No       |  |    |
| IS YOUR CHILD A FLUENT ENGLISH SPEAKER?  | 103               |       |          |  |    |
| IS YOUR CHILD A FLUENT ENGLISH SPEAKER?  IS EITHER PARENT A MEMBER OF THE SERVICES?  | Yes               |       | No       |  |    |
|  |                   |       | No<br>No |  |    |
| IS EITHER PARENT A MEMBER OF THE SERVICES?  IS THIS CHILD ADOPTED?  IS THIS CHILD A 'LOOKED AFTER CHILD?'  | Yes               |       |          |  |    |
| IS EITHER PARENT A MEMBER OF THE SERVICES?  IS THIS CHILD ADOPTED?   | Yes               |       | No       |  |    |
| IS EITHER PARENT A MEMBER OF THE SERVICES?  IS THIS CHILD ADOPTED?  IS THIS CHILD A 'LOOKED AFTER CHILD?'  e.g. Adopted / Fostered   | Yes<br>Yes<br>Yes |       | No<br>No |  |    |
| IS EITHER PARENT A MEMBER OF THE SERVICES?  IS THIS CHILD ADOPTED?  IS THIS CHILD A 'LOOKED AFTER CHILD?' e.g. Adopted / Fostered  IS THIS CHILD A YOUNG CARER?  | Yes<br>Yes<br>Yes |       | No<br>No |  |    |

<u>PLEASE INFORM SCHOOL IMMEDIATELY IN WRITING OF ANY CHANGES TO ADDRESS, TELEPHONE NUMBERS, ALLERGIES ETC. SO THAT YOUR CHILD'S RECORD CAN BE KEPT UP TO DATE</u>

Please refer to our Privacy Notice in your prospectus pack, or via the school website www.queensqateprimary.co.uk to see how we use the information you have provided

#### Office use:

| Trips EV3                   | Home/School Agreement |  |
|-----------------------------|-----------------------|--|
| Images Consent              | Ethnicity             |  |
| Internet Consent            | Birth Certificate     |  |
| SRE Consent                 | FSM Entitlement       |  |
| Privacy Notice Confirmation | GDPR Agreement        |  |



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### General Data Protection Regulation (GPDR) 2019 Agreement

The General Data Protection Regulation (GDPR) replaces the Data Protection Act and came into effect on 25th May 2018. The data protection laws needed to change because the old ones were out of date in today's digital world. The GDPR was created to strengthen data protection for people within the EU. It aims to give individuals more control over their personal data and make it easier for them to access.

I confirm that any individual whose data I have provided has given me permission to provide you with their contact details and has given you permission to contact them if necessary. I will keep the school up to date with any changes.

| Signature of person completing this document: |  |
|---|--|
| Name of person completing this document:      |  |
| Date:   |  |

Queensgate Foundation Primary School is the data controller for the personal information you provide on this application form. Queensgate's Data Protection Officer is the Head of Legal Services and Monitoring Officer and can be contacted at <a href="mailto:dpo@iow.qov.uk">dpo@iow.qov.uk</a>.

Your information will be used to enable us to provide an education for your child. Your data may be shared with the local authority, department for education and other third parties if we are required to do so by law. We will retain your details until your child reaches the age of 25 (or 30 for students with a statement/Education Health Care Plan). You can review any of our policies including our retention policy and full privacy notice on our website. For further details on how your information is used, how we maintain the security of your information, and your rights including how to access information we hold on you, and how to complain if you have any concerns about how your personal details are processed, please visit our website or email admin@queensqateprimary.co.uk or call main reception on 01983 292872

Please note, unless this sheet is signed we cannot process the application.