



## NURSERY - DATA COLLECTION SHEET

**Please complete the information below and return to school as soon as possible**

Surname:	Legal Surname:
Forename:	Middle Name:
Chosen Name:	Gender:
Date of Birth:	
Address:	
Telephone Number:	
Email:	

Please give details of all persons who have parental responsibility and anyone else to be contacted in an emergency, placing them in the order they should be contacted. Please provide two or more contacts with telephone numbers wherever possible. *If any details change during the school year please let the school office know asap to ensure that your child's record is up to date in case of an emergency.*

Priority	Name Relationship	Parental Responsibility	Home Address/Phone/Email	Work Address/Home/Email
1				
2				
3				
4				

Dietary Needs:		
Medical Practice:		Health Visitor:
GP:		
Medical Practice Telephone Number:		
Medical Conditions:		
Social Worker/Family Partner –		
Early Help Assessment		
YES <input style="width: 50px; height: 20px;" type="checkbox"/>		NO <input style="width: 50px; height: 20px;" type="checkbox"/>
Ethnicity:	Home Language:	Religion:
Brothers and Sisters at Bailey Green Primary School:		

Data Protection Act 1998: The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and keep it up to date. The school is required to share some of the data with the Local Authority and with the DfE.

Signature \_\_\_\_\_ Date \_\_\_\_\_