

## ARK VICTORIA PRIMARY ACADEMY PUPIL INFORMATION FORM

Please complete all sections in BLOCK CAPITALS using black ink.

PUPIL PERSONAL INFORMATION				
Date of meeting:		Pupil's legal forename(s):		
Pupil's legal surname:			Preferred name	
Admission date:	DOB:	Gender: M F	Ethnicity:	Religion:
Year group on entry:	Class:	Length of time in U.K	Home Languages:	
Country of birth:	Date arrived in U.K:		Asylum Seeker: Yes No	Traveller: Yes No
Nationality:				
Previous schooling (including community schools attended):				
PARENT/CARER CONTACT INFORMATION				
Name of parents/carers:			Main Address:	
Relationship of carer/carers to the pupil:				
Parental Responsibility:				
Home Telephone:			Mobile Phone:	
Work Phone:			Email:	
EMERGENCY CONTACTS (3)				
If you are unable to contact the person(s) with parental responsibility, please give TWO further adults emergency contacts to act on your behalf:				
Contact 1				
Title and Full Name		Parental Responsibility	Yes/No	
Address		Home Telephone:		
		Mobile Telephone:		
		Work Phone:		
Contact 2				
Title and Full Name		Parental Responsibility	Yes/No	
Address		Home Telephone:		
		Mobile Telephone:		
		Work Phone:		
Contact 3				
Title and Full Name		Parental Responsibility	Yes/No	
Address		Home Telephone:		
		Mobile Telephone:		
		Work Phone:		

<b>SIBLINGS</b>				
Position in family?		1 2 3 4 5 6 7 8 9 10		
Siblings not at Ark Victoria:		Emergency contacts:		
<b>Siblings</b> (at Ark Victoria)				
Name:		DOB	Class	
Name:		DOB	Class	
Name:		DOB	Class	
<b>MEDICAL DETAILS</b>				
Name of GP/Medical Centre		Address and Telephone of GP/Medical Centre		
Details of allergies/medication etc.		Dietary restrictions:		
<b>PUPIL'S USE OF LANGUAGE: (including English)</b>				
Languages	Speaking (proficiency)		Reading (proficiency)	Writing (proficiency)
	Home	School		
<b>ETHNIC BACKGROUND</b>				
<i>Please specify the ethnicity of the child next to the category which best describes their background and add specific detail:</i>				
Arab/British Arab		East Asian		
Asian / Asian British		Gypsy/Traveller (Irish/Roma)		
Black Caribbean/Black British		White British		
Black African /Black African British		White European		
Any other Mixed Background		Any other (please state)		

<b>WELFARE INFORMATION</b>			
Is your child in the care of the local authority?	Yes/No	Name of Local Authority	
Are living in permanent or temporary accommodation?	Permanent/Temporary/Other		
Have there ever been any services involved with the family?			Yes/No
If yes, are they currently involved?			Yes/No
Give details...			
Is the child privately fostered? If yes, please give details...			
Has the child previously been 'Looked After' (in care)? If yes, please give details...			
<b>SPECIAL EDUCATIONAL NEEDS AND DISABILITY</b>			
Does your child have any Special Educational Needs or Disability? (Learning, disability, behaviour)?			Yes/No
If yes, give details...			
Are there any agency/hospital/medical centre involvements with your child?			Yes/No
If yes, give details...			
<b>TRAVEL INFORMATION</b>			
<i>Please tick one method of transport that best describes the way the pupil will use to travel to/from the Academy.</i>			
Walk	Cycle	Car/van	
Bus	Taxi	Car share with another family	
<b>LUNCH CHOICES</b>			
<i>Please tick which meal your child will normally have- parents may choose on a day-to-day basis whether they are having a school meal or sandwiches. Your child will be asked to indicate to the teacher what they will be having each day:</i>			
Free school meals		Paid school meal (please bring dinner money in advance on Mondays to the Academy office)	
Sandwiches			
<b>PERMISSIONS</b>			
<i>During your child's schooling, we may organise small outings in the local area. Your child will be closely supervised during these events. Please note that a more formal written consent for further afield, day or longer or residential outings are required. Please tick to confirm whether you give permission for your child to attend small outings:</i>			
Yes		No	
<i>Photographs to be taken and used for Academy publicity, newsletters, and displays or on the school website.</i>			
Yes		No	

<b>SCHOOL INFORMATION</b>			
	<b>Yes</b>	<b>Parent Given</b>	<b>Yes</b>
<b>ARK Victoria Vision and Values</b>		<b>Welcome letter</b>	
<b>School Timetable (opening and closing times)</b>		<b>Commitment to Achievement Agreement</b>	
<b>School Uniform</b>		<b>Price of school lunch</b>	
<b>Attendance</b>		<b>FSM form</b>	
<b>Commitment to Achievement Agreement</b>		<b>Breakfast club form</b>	
<b>Expectations of behaviour</b>		<b>Tour of school</b>	
<b>Home Learning</b>		<b>Date child will start</b>	
<b>Informed of school curriculum</b>			
<b>Informed of PE procedures</b>			
<b>Contact previous school</b>			
<b>Check CTF/info etc. arrived</b>			
<b>Notes: Why have they left the previous school? What is their favourite subject? What subject do they find difficult? Will they be attending breakfast club/after school club? Does the family have any concerns?</b>			
<b>SUPPORT FOR PARENTS AND CARERS (please tick)</b>			
Interpreter required at parent's meetings			
Bilingual translations of school letters and leaflets would be helpful			
Contacts of local community groups are required			

## DECLARATION BY PARENT/CARER

I CONFIRM THIS FORM WAS COMPLETED BY THE PARENT/CARAER AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE THE DETAILS GIVEN ABOVE ARE CORRECT

Signature ..... Relationship .....

Print Name ..... Date .....

<b>For Office use only:</b>	
Date form submitted	Returning pupil?
Siblings in school?	Referred by BCC / Court Order
Proof of ID / address provided (original documents)	Copies taken?
EAL? Y / N	SEND? Y / N