

CONFIDENTIAL DOCUMENT

DATA COLLECTION FORM 2019

Please complete all sections of this form.

Student's Personal Details

Forename	<input style="width: 95%;" type="text"/>	Middle Name(s)	<input style="width: 95%;" type="text"/>
Legal Surname	<input style="width: 95%;" type="text"/>	Preferred Surname:	<input style="width: 95%;" type="text"/>
Preferred Forename:	<input style="width: 95%;" type="text"/>	Male/Female	<input style="width: 20%;" type="text"/> Date of Birth: <input style="width: 20%;" type="text"/>
Address:	<input style="width: 95%;" type="text"/>		<input style="width: 20%;" type="text"/>
			Postcode:

Emergency Contacts

Please give details of parents, carers and anyone else who could be contacted in an emergency. **Please ensure you have the consent of the person you are naming as a contact to provide their details on this form.** The names of the parents/carers must be given number 1 and/or 2 priority, please place other contacts in the order you wish them to be contacted in an emergency. You may give as many contact names as you wish; if you have more than four continue on another sheet. Please ensure that the information is clear. Please inform us if parent has Parental Responsibility by putting a PR next to Mother or Father.

	Surname	Forename	Title	Relationship has PR?	Address	Home Tel No	Day Tel No
1							
Email Address of contact number 1:							
2							
3							
4							

Non-Resident Parents

In the case of divorced or separated parents or if the child is in foster care, should copies of correspondence, reports etc be sent to non-resident parent(s)? **YES / NO**

If yes, please give their details below.

Surname	Forename	Title	Relationship	Address	Home Tel No	Day Tel No

In order to identify student's potential to take part in Government Aim Higher activities (aimed at raising participation in Higher Education) we would like the following information.

Have you or your partner been to University?

Father	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Information refused	<input type="checkbox"/>
Mother	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Information refused	<input type="checkbox"/>
Carer	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Information refused	<input type="checkbox"/>

Child's GP

Surgery Name: <input style="width: 90%;" type="text"/>	Doctors Name: <input style="width: 90%;" type="text"/>
Address: <input style="width: 95%; height: 60px;" type="text"/>	Telephone Number: <input style="width: 90%;" type="text"/>

Ethnic Origin, Home Language, Religion

Ethnic Origin	Home Language	Religion

Meal Arrangements

Please tick the **shaded box** indicating your child's meal arrangements. **Please tick one box only.**

Free School Meal		Paid School Meal		Sandwiches	
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Travel Arrangements

Please tick the **shaded box** indicating how your child will travel to school. **Please tick one box only;** their most often used mode of travel.

Bicycle		Train		Bus		Walk		Car		Car Share		Coach		Taxi	
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Previous School

School Name: <input style="width: 95%;" type="text"/>	Telephone No: <input style="width: 90%;" type="text"/>
School Address: <input style="width: 95%; height: 80px;" type="text"/>	
Date Started: <input style="width: 90%;" type="text"/>	Date Left: <input style="width: 90%;" type="text"/>
Reason for leaving: <input style="width: 95%;" type="text"/>	

Medical Information

* delete as applicable

1.	Has your child suffered any serious effects after immunisation/vaccination? If yes, please specify	*Yes / No
.....		
2.	Does your child have any traces of Asthma ? If yes, please give the name of the medication used Reliever : Preventer: Other:	*Yes/No.
3.	Does your child have any allergies ? If yes, please specify	*Yes/No.
.....		
4.	Does your child have Epilepsy ? If yes, please give the name of any medication used	*Yes/No
.....		
5.	Does your child have Diabetes ? If yes, please give the name of any medication used	*Yes/No
.....		
6.	Does your child have any other health problem/medical condition ? If yes, please specify what medication is used?	*Yes/No
.....		
7.	Any special instructions for dealing with your child's health or other information you feel we should know;	

I, the parent/carer of _____ (student's name) understand that:

If a student becomes ill or is injured in school, parents/carers will be informed. It is then the duty of those parents/carers to make arrangements for the child, by collecting them to take them home or to the doctor or hospital. It is **VITAL** that the school has accurate, up-to-date home, work or mobile telephone numbers and any telephone numbers of relatives who could be contacted in an emergency.

In emergencies, where a child has to be accompanied to hospital by a member of staff of the School, it is important that the child's parent/carer goes to the hospital as soon as possible as hospital staff need parent's/carers permission to treat a child.

With the exception of reliever inhalers for asthma or epipen for severe allergies, **NO STUDENT MAY BE IN POSSESSION OF ANY FORM OF MEDICATION IN SCHOOL AT ANY TIME.**

Following local government guidelines, we are required to hold up-to-date written consent from you regarding your child's medication. Therefore, should your child require medication during the school day **YOU MUST** complete a Health Care Plan form. This form can be obtained from reception.

Signed: Date:
(Parent/Carer)

IT IS VITAL THAT THE SCHOOL IS INFORMED IMMEDIATELY OF ANY CHANGES IN THE INFORMATION GIVEN ON THIS FORM

General Data Protection Regulation Act 2018: The school is registered under the Data Protection Act for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority and with the DfE. For further information, please refer to the Privacy Notice on the school's website.



The Marriotts Home/School Agreement

This agreement outlines how the school, parents/carers and students will work in partnership to help meet the needs of each student.

Parents/Carers

I/We will:

- Ensure that my/our child is organised for school – in correct uniform with all necessary equipment.
- Ensure my/our child attends on time and notify the school if he/she is late or absent.
- Encourage my/our child to have a positive approach and attitude to learning.
- Support and encourage my/our child in his/her school work.
- Ensure that my child completes all homework set.
- Notify the school if any situation is likely to affect my/our child's learning.
- Make the most of all opportunities to meet with staff and encourage a dialogue between the school and home.
- Support the school Rewards and Behaviour for Learning Policy including same day detentions.
- Not make requests for my child to be out of school during term time other than in exceptional circumstances this includes holidays.
- Encourage my/our child not to engage in discrimination, harassment and victimisation of others.
- Engage positively and politely with school staff.
- Share any concerns that you have regarding school in a timely fashion, informing the school through the correct channels.
- Attend IAG and parent consultation events.

We have discussed the above agreement and are pleased to co-operate with the school in upholding these standards

Signature of Parent/Carer.....

School

Marriotts will:

- Expect all members of the school community not to engage in discrimination, harassment and victimisation.
- Expect students to attend school in correct uniform and have the necessary equipment for lessons.
- Work with parents/carers and students to encourage regular attendance and excellent punctuality.
- Deliver the curriculum in terms of lessons and homework, ensuring work is marked and provide support for all students in order that learning needs are met.
- Expect students to behave positively, have a good approach to attitude and learning, respect each other and together create a safe learning environment for all.
- Take appropriate action in cases of student misconduct.
- Respond to parental concerns relating to the welfare of students.
- Respond to parental concerns in a timely fashion in accordance with school policy.
- Support parents/carers and students through regular consultation evenings, reports and other forms of communication.
- Keep parents/carers informed of school events and activities.
- Ensure there is a culture of safeguarding and that all students have a safe and secure learning environment.



The Marriotts Home/School Agreement

Student

I will:

- I will follow the school rules: Aim High, Work Hard, Be Kind, Respect – Attitude – Ownership, Community Code.
- I will follow our whole school strategy: The Marriotts Way; Every Minute Matters; The Learning Journey; Everybody reads and writes well.
- I will respect all members of the Marriotts Community.
- I will respect the gender, race, religion and views of all members of the Marriotts Community.
- I will attend school and lessons punctually every day.
- I will attend school fully equipped every day.
- I will wear my correct uniform smartly every day.
- I will take pride in my work and complete all tasks and homework on time and to the best of my ability.
- I will represent Marriotts positively and promote safety in the local community.
- I will strive to be aspirational, a leader and role model to my peers and contribute positively to the Marriotts Community.

Student Name.....

Date.....

We have discussed the above agreement and are pleased to co-operate with the school in upholding these standards.

Signature of Parent/Carer.....

Date.....



CONSENT FORM FOR THE USE OF BIOMETRIC INFORMATION IN SCHOOL

Please complete this form if you consent to the school taking and using information from your child's fingerprint by Marriotts School as part of an automated biometric recognition system.

This biometric information will be used by Marriotts School for the purpose of entering the school premises, administration of school canteen and your child's use of the photocopiers around the site.

In signing this form, you are authorising the school to use your child's biometric information for this purpose until he/she either leaves the school or ceases to use the system. **If you wish to withdraw your consent at any time, this must be done so in writing and sent to the school at the following address:**

Data Manager
Marriotts School
Brittain Way
Stevenage
Hertfordshire
SG2 8UT

Once your child comes off roll from our system then, his/her biometric information is automatically deleted.

Having read guidance provided to me by Marriotts School, I give consent to information from the biometric system, i.e. fingerprint of my child to be taken.

Students Full Name: _____

This is part of an automated biometric recognition system for entering the school premises, administration of school canteen and your child's use of the photocopiers around the site.

I am fully aware that I can opt out at any time and my child's biometric information would be deleted from the school system:

Name of Parent/Carer: _____

Signature: _____

Date: _____



Online Safety Acceptable Use Agreement

Dear Parent / Carer

ICT including the internet, e-mail, mobile technologies and online resources have become an important part of learning in our school. We expect all students to be safe and responsible when using any ICT. It is essential that students are aware of eSafety and know how to stay safe when using any ICT.

Students are expected to read and discuss this agreement with their parent or carer and then to sign and follow the terms of the agreement. Any concerns or explanation can be discussed with their class teacher, Head of Year or Head of ICT.

Please sign below confirming you have read through the agreement.

This record will be kept on record at the school.

Yours faithfully

Administration

Student Agreement:

Student Full Name: _____

We have discussed this document and confirm that our child agrees to follow the eSafety rules and to support the safe and responsible use of ICT at Marriotts School.

Student signature : _____

Online Safety Acceptable Use Agreement

Parent/s Carer/s Name/s : _____

I/we have discussed this agreement, which highlights the associated risks when accessing the internet, mobile and digital technologies, with our child. I/we agree to support them in following the terms of this agreement.

I/we also agree not to share school related information or images online or to post material that may bring the school or any individual within it into disrepute. (Rather than posting negative material online, any parent, distressed or concerned about an aspect of school should make immediate contact with a member of staff. Negative postings about the school would impact on the reputation of the whole school community. Parents are encouraged to report breaches so that we can protect the reputation of the school, staff, pupils and parents.)

I/we also agree only to use personal mobile phones and devices in designated areas of the school unless otherwise informed, e.g. for specific events and activities. I/we understand that under no circumstance should images be taken at any time on school premises of anyone other than our own child/ren, unless there is a pre-specified agreement. I/we understand that when on school premises but not in a designated area where phones can be used, they must be switched off and out of sight.

Parent/ Carer Signature : _____

Student Signature: _____ Date: _____



Image consent form

For use by Hertfordshire County Council schools

To comply with the GDPR and Data Protection Act, we need to obtain consent before we can photograph or make any recordings of your child.

Conditions of use are stated in the Image Consent Leaflet in this pack:

To give your consent, please complete the information below.

Please tick those that apply:

I give permission for my child's image to be taken and used in publicity material for the school, including printed and electronic publications, video and webcam recordings and on websites. No full name will be displayed with any image used. School website / School Facebook / Newsletter.

I give permission for my child's forename surname (**without image**) to be used in publicity material for the school, including printed and electronic publications, video and webcam recordings and on websites. School website / School Facebook / Newsletter.

I give permission for images of my child to be used by the news media in printed and/or electronic form and stored in their archives. This might include images sent to the news media by the school and images/ footage the media may take themselves if invited to the school to cover an event.

I do not want my child's image used in any publicity

I have read and understood the information on the Image Consent Leaflet provided.

Name of child:

Parent's or carer's signature:

Name (in block capitals)

Date:

School:

Marriotts School