

Frome Community College – SIXTH FORM - Data Collection Sheet

The school has a statutory duty to ensure that your data is up to date and accurate. Information is required to fulfil our legal and statutory obligations. Please can you complete the details required below, and return the completed form to the Sixth Form Reception in a sealed envelope. Please refer to the school's Privacy Notice on our website for further explanation of the data collected in school, why it is collected, and your rights under the Data Protection Act 2018. Thank you.

(A) STUDENT DETAILS

Legal Surname:	Legal Forename:	Legal Middle name:
Preferred name		Gender:
Date of Birth:	Previous School:	Internal applicants only Reg Group:
Home Address:		

MEALS

Free School Meal: Is your child entitled to a (Benefits related) Free Meal? https://www.somerset.gov.uk/education-and-families/free-school-meals/	
---	--

DIETARY NEEDS

--

MEDICAL DETAILS

Medical Practice:	Tel:
Address:	

Medical Condition(s):	Medical Note(s):
-----------------------	------------------

TRAVEL DETAILS

Travel Arrangements (normal method of getting to school):	Options: Boarder, Bus, Car Share (i.e. 2 families sharing), Car/Van, Cycle, School Bus, Metro/Tram/Light Rail, Other, Public Bus, Taxi, Train, Walking [Only 1 option may be chosen]
Route if appropriate:	

YOUNG CARERS

Please complete this box if you would like the school to be aware that your child has regular, caring responsibilities for someone who has a disability or long term health need? (When did their caring role start?)	
If your child is a Young Carer and your health/disability might make it difficult for you to accompany them to Accident and Emergency (if that were necessary during the school day), do you give permission for your child to attend Accident and Emergency with a staff member?	

Post Looked-After Arrangements: (Please ✓ as appropriate)

Please tick the appropriate box below if you would like the school to be aware of, and record your child's status on, the School Census.

Adopted from Care	
Left Care under a Special Guardianship Order	
Left Care under a Residence or Child Arrangements Order	

ETHNIC / CULTURAL DETAILS

Ethnicity:	Religion:	First Language [i.e. language spoken at home during early years]
------------	-----------	--

SERVICE CHILD

Is the parent(s) the child resides with currently serving in the (regular) Armed Services?	
--	--

(B) PARENT / CARER DETAILS

1. Full name: Home address:	Legal Parental Responsibility? (Y/N)	Title:	Phone: Email:	Relationship to student:
2. Full name: Home address	Legal Parental Responsibility? (Y/N)	Title:	Phone: Email:	Relationship to student:
3. Other contact: Home address:	Legal Parental Responsibility? (Y/N)	Title:	Phone: Email:	Relationship to student:

Please check/give details of all persons who have Legal Parental Responsibility, also any additional contacts. (For a definition refer to the GOV.UK website and search for Parental Rights and Responsibilities). Please note, removing a contact with Parental Responsibility requires supporting documentation.

EMERGENCY CONTACTS:

Please list any additional emergency contacts **and the priority in which they should be contacted.**

Priority	Legal Parental Responsibility	Contact Title & Full Name/Relationship	Home Address, Phone/Mobile		Work Phone/Email

The school is classed as a Data Controller under the Data Protection Act 2018 and as such has a duty to process any personal information obtained and held by them according to the Data Protection Principles. The school also has a statutory duty to share some or all of this information with other professional bodies as set out in the school's Privacy Notice. Should you have any queries in relation to this please contact the school directly.

Signature:

Date:

Print Name:

Please return to the school on TRANSITION DAY - or post to The Sixth Form Office, Frome College, Bath Road, Frome Somerset BA11 2HQ