

St Benedict's RC Primary School
Back Lane
Ampleforth
York
YO62 4DE



Telephone: 01439 788 340
e-mail: admin@st-benedicts.n-yorks.sch.uk

Executive Headteacher: Mr D Harrison
Head of School: Mr G Eddy

Please complete the information below. These details will only be used in relation to the Children Act 1989 and 2002, Data Protection Act 2018. Please refer to our Privacy Notice for details of how your data will be processed.

Child's Details:			
Should you be allocated a place, you will need to bring the child's birth certificate or adoption order to school for copying. This proves the child's entitlement to education.			
Full Name		Date of Birth	
Name that child is known as:			
Address		Home Telephone number	
Post code			
Home email		We will use your details to contact regarding your child, this will include text messaging	
Requested date of admission			
Parent/Family Contact Details			
Priority One Contact (Please remember to update the office with any changes, especially mobile numbers)			
Full Name		Relationship	
Address (if different from above)		Home telephone (if different from above)	
Work Telephone		Mobile Telephone	
I have parental responsibility for the child named above. Please note Only those people with parental responsibility may sign permission letters etc.			
Signed			Date
Priority Two Contact			
Full Name		Relationship	
Address		Home telephone	
Work Telephone		Mobile Telephone	
Email Address		Receive Newsletters	
I have parental responsibility for the child named above. (Do not sign if you do not have parental responsibility).			
Signed			Date

Priority Three Contact											
Full Name			Relationship								
Address											
Telephone numbers:			1 st			2 nd			3 rd		
Priority Four Contact											
Full Name			Relationship								
Address											
Telephone numbers:			1 st			2 nd			3 rd		
Names of people who will usually collect your child from school											
Name			Relationship								
Name			Relationship								
Name			Relationship								
Names of others who live with your child & their relationship to your child											
Name			Relationship								
Name			Relationship								
Name			Relationship								
Name			Relationship								
Child's Medical Details & Contacts											
Doctor Name			Surgery Name								
Surgery Address Post Code			Surgery Telephone number								
Details of any existing medical conditions that your child has?			Details of any known allergies Does your child wear glasses?								
Child's Medical Details & Contacts Continued											
Child's NHS Number			Any other information								
			On admission to the school please complete additional permission to administrator inhaler form if required								
Other Information											
Usual mode of transport to school (Please tick)											
Walk		Bus		Car		Car share		Cycle		Taxi	
Are you in receipt of any of the following? (please tick)											
Income Support						Income-based Job seekers Allowance					
Income-related Employment and Support Allowance						Support under Part VI of the Immigration and Asylum Act 1999					
Working Tax Credit run-on - paid for 4 weeks after you stop qualifying for Working Tax Credit						Child Tax Credit (provided you're not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)					
the guaranteed element of State Pension Credit						Universal Credit, - if you apply on or after 1 April 2018 your household income must be less than £7,400 a year (after tax and not including any benefits you get)					

Meals: From September 2014 children in reception, years 1 & 2 are entitled to a pre-paid (free) meal					
Would you like your child to have a school meal? Yes / No					
Has your child been made the subject of an adoption order, placement order or freeing order? Yes / No					
Has your child any of the following orders decided by the courts? (please tick)					
Residence orders		Emergency protection order			
Contact order		Care order or interim care order			
Specific issue order		Supervision order			
Prohibited steps order		Education supervision order			
Child protection order					
Language					
Mother tongue		Language spoken at home			
Ethnicity Ethnic background describes how we think of ourselves, it is not the same as nationality of country of birth (please tick)					
White	British		Mixed/dual Background	White & Black Caribbean	
	Irish			White & Black African	
	Traveller of Irish Heritage			White & Asian	
	Gypsy/Roma			Any other mixed background	
	Any other white background				
Asian or Asian British	Indian		Black or black British	Caribbean	
	Pakistani			African	
	Bangladeshi			Any other black background	
	Any other Asian Background				
Chinese	Chinese		Any other	Any other ethnic background	
I do not wish an ethnic background to be recorded					
Child's Religion					
Religion (please tick)		Roman Catholic			
		Non-Roman Catholic			
If R.C please indicate the date and place of baptism					
Please provide a copy of the child's Baptismal Certificate for children baptised in another parish than St Benedict's Parish					
If non-R C, please indicate if there are any family religious affiliations and give details:					

**THE COMPLETION OF THIS FORM IN NO WAY INDICATES THAT A PLACE IS MADE AVAILABLE AT ST BENEDICT'S R C PRIMARY SCHOOL.
THE DECISION OF THE GOVERNING BODY WILL BE MADE KNOWN TO THE HEAD TEACHER IN DUE COURSE.
SHOULD YOUR CHILD NOT BE ALLOCATED A PLACE AT ST BENEDICT'S THIS FORM WILL BE SECURELY DESTROYED.**