

Heathcote School and Science College

YEAR 12 Information Sheet



Please complete this form and return the document to the Heathcote Sixth Form Reception as soon as possible.
We are unable to enrol you unless all fields on this form have been fully completed.

Student's Details

Surname:				
First name(s):				
Name to be used in school:				
Any previous forenames/surnames:				
Date of birth:	/ /	Gender:	M / F	
Home address:			Post code:	
Home phone number:		Mobile no:		
Email address:				
Career aspirations				

1st Contact in case of an emergency:

Does this person have parental responsibility?	Yes / No			
Relationship to student:				
Full name:				
Home address:			Post code:	
Home phone number:		Mobile no:		
Work number:		Email address:		

2nd Contact in case of an emergency:

Does this person have parental responsibility?	Yes/ No		
Relationship to student:			
Full name:			
Home address:			Post Code: <input type="text"/>
Home phone number:		Mobile no:	
Work number:		Email address:	

Other Emergency Contacts

We sometimes have difficulty contacting the 1st and 2nd emergency contacts. Please provide details of other contact(s) that may be reached in case of an emergency.

Full name	Order of contact in case of emergency	Relationship to student	Address	Daytime contact number
	(Please circle one) 3 rd 4 th 5 th			
	(Please circle one) 3 rd 4 th 5 th			
	(Please circle one) 3 rd 4 th 5 th			

If you wish to add further names to use as contacts, please attach a supplementary sheet.

Siblings

Please provide the names of all the other children in the family:

Siblings full name	School	Date of Birth
		/ /
		/ /
		/ /
		/ /
		/ /

Medical Information—This section MUST be completed as fully as possible.

Doctor's name:			
Doctor's address:			
		Post code:	
Telephone number:			
Does your child have any known allergies? If yes, please specify.	Yes/No		
Does your child take any regular medication? If yes, please specify.	Yes/No		
Does your child have any other medical conditions? If yes, please specify.	Yes/No		

Further Student Information

Religion: (Please tick the appropriate box)	Buddhist		Muslim	
	Christian		No religion	
	Hindu		Refused	
	Jewish		Sikh	
	Other (please specify) _____			
Nationality:				
Country of birth: (As seen on passport)				
First language spoken:				
Other than English, is your child fluent in any other language? If yes, please specify and state whether they would be interested in taking a formal qualification in this language.	Yes/No			
How will your child travel to school? Please tick the appropriate box.	Walk		Bus/Train	
	Car/Car share		Cycle	
	Other (please specify) _____			
What is the student's lunch arrangement? Please tick the appropriate box.	School meal		Free school meal	
	Packed lunch		Other	
If you have ticked the 'Free school meal' box or your child has ever received free school meals, please give start and end dates.	Start date: _____ End date: _____			
Is there a legal order relating to your child? If yes, please specify.	Yes/No			

School last attended: (Full name and address)	
	Post code: <input style="width: 100px;" type="text"/>
Dates attended:	
Does your child have access to a computer, linked to the internet at home?	Yes/No

Additional Learning Support

Please note: Any pupil that qualified for Exam Access Arrangements in their previous educational placement (EAA) e.g. extra time/reader/modified or coloured papers, will need to produce evidence for that arrangement to continue. This document (available from previous educational placement) is called a Form 8 and **MUST** include a copy of the credentials of their assessor i.e. copy of qualifying certificate.

Does your child have any specific Learning/Emotional/Behavioural concerns?

Yes	<input type="checkbox"/>	If yes, please give details.
No	<input type="checkbox"/>	

Further Information

Has your child ever had the support of a learning mentor?

Yes	<input type="checkbox"/>	If yes, please give details.
No	<input type="checkbox"/>	

Are there any CP/Safeguarding issues we need to be informed of?

Yes	<input type="checkbox"/>	If yes, please give details.
No	<input type="checkbox"/>	

Has your child ever been excluded or attended a PRU?

Yes	<input type="checkbox"/>	If yes, please give details.
No	<input type="checkbox"/>	

More Able Register

Has your child ever been on the More Able or Gifted and Talented register?

Yes	<input type="checkbox"/>	If yes, please give details, specifying which subject(s).
No	<input type="checkbox"/>	

Other Information

Please write here any additional information that you would like us to know:

Ethnicity Information

The following questions seek information about your ethnic background. Our ethnic background describes how we think of ourselves.

Please note: Any information you provide will be used solely to compile statistics on the school careers and experiences of pupils from different ethnic backgrounds, to help ensure that all pupils have the opportunity to fulfil their potential. These statistics will not allow individual pupils to be identified. From time to time, the information will be passed on to the Local Education Authority and the Department for Education and Skills (DfES) to contribute to local and national statistics.

Please tick one box only to indicate your ethnic background:

White

- | | | |
|-------------------------------|--------------------------|--------------|
| ◆ Albanian | <input type="checkbox"/> | (WALB) |
| ◆ Bosnian-Herzegovinian | <input type="checkbox"/> | (WBOS) |
| ◆ British | <input type="checkbox"/> | (WBRI) |
| ◆ Croatian | <input type="checkbox"/> | (WCRO) |
| ◆ Greek/Greek Cypriot | <input type="checkbox"/> | (WGRE) |
| ◆ Gypsy/Roma | <input type="checkbox"/> | (WROM) |
| ◆ Irish | <input type="checkbox"/> | (WIRI) |
| ◆ Kosovan | <input type="checkbox"/> | (WKOS) |
| ◆ Serbian | <input type="checkbox"/> | (WSER) |
| ◆ Traveller of Irish Heritage | <input type="checkbox"/> | (WIRT) |
| ◆ Turkish/Turkish Cypriot | <input type="checkbox"/> | (WTUR) |
| ◆ White Eastern European | <input type="checkbox"/> | (WEEU) |
| ◆ White Western European | <input type="checkbox"/> | (WWEU) |
| ◆ White other (please state) | <input type="checkbox"/> | (WOTW) |

Mixed

- | | | |
|---|--------------------------|--------------|
| ◆ White and Black Caribbean | <input type="checkbox"/> | MWBC) |
| ◆ White and Black African | <input type="checkbox"/> | (MWBA) |
| ◆ White and Asian | <input type="checkbox"/> | (MWAS) |
| ◆ Any other mixed background (please state) | <input type="checkbox"/> | (MOTH) |

Asian or Asian British

- | | | |
|---|--------------------------|--------------|
| ◆ Indian | <input type="checkbox"/> | (AIND) |
| ◆ Pakistani | <input type="checkbox"/> | (APKN) |
| ◆ Bangladeshi | <input type="checkbox"/> | (ABAN) |
| ◆ Any other Asian background (please state) | <input type="checkbox"/> | (AOTH) |

Black or Black British

- | | | |
|---|--------------------------|--------------|
| ◆ Caribbean | <input type="checkbox"/> | (BCRB) |
| ◆ Ghanaian | <input type="checkbox"/> | (BGHA) |
| ◆ Nigerian | <input type="checkbox"/> | (BNGN) |
| ◆ Somali | <input type="checkbox"/> | (BSOM) |
| ◆ Other black African | <input type="checkbox"/> | (BAOF) |
| ◆ Any other black background (please state) | <input type="checkbox"/> | (BOTH) |

Chinese

(CHNE)

Any other ethnic group (please state)

..... (OOTH)

If you do not wish the school to record an ethnic background for your child please tick this box. (REFU)

Parental Agreement

Please read through the following statements.

Celebrating success

From time to time we photograph students for internal and external purposes to celebrate their achievements and the achievement of the school. Please confirm that you give permission for your son/daughter to have their photograph taken.

Representing the school – school transport

Your son/daughter may be asked to represent Heathcote which will involve having to travel using school transport. Please confirm that you give your permission for your son/daughter to travel with members of the school staff and using school transport.

Please tick the appropriate box.

1. I give permission for my child to have their photograph taken.	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. I give permission for my child to travel to and from events using school transport.	Yes <input type="checkbox"/> No <input type="checkbox"/>

3. I agree to support my child to follow the behaviour policy of Heathcote School and to abide by the rules and regulations as set out in the Sixth Form Handbook available on the school website: www.heathcoteschool.com.

4. I can confirm that the information supplied on this form is correct.

I am the person with parental responsibility:

Print name _____

Signed _____ Date _____

**Please complete,
sign and date.**

Student Agreement

Please read through the following statements.

- I agree to Heathcote School continuing to contact my parent/carer to discuss my learning, progress or behaviour even after I become 18 years of age.
- I agree to follow the behaviour policy of Heathcote School and to abide by the rules and regulations as set out in the Sixth Form Handbook available on the school website: www.heathcoteschool.com.

Student name: _____

Student signature: _____

Date: _____

**Please complete,
sign and date.**

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM