



BEP Education

Application Form

Data Protection Act

This information is being collected so that we put your daughter/son in the right class for her/his age group and so that we can track her/his attendance and progress.

It also helps us to keep your daughter/son safe – so that we can contact you if they are ill or hurt, for example.

We will not contact your daughter/son's mainstream school without your permission in writing.

We give the information above the solid line ████████ (see below) to our funders so that they can check our work. We do not give information to any other organisation.

Daughter's/son's name:Home Post Code:.....

Weekday (mainstream) school attended:

Year group: Date of birth:

Girl/boy: Ethnic origin:

Parent's/carer's name:

Address:

.....

Postcode: Home tel:.....

Email:Mobile:.....

Emergency names and telephone numbers

Primary contact:

Tel:

Secondary contact:

Tel:

Any other information we should know

(such as your child’s medical condition, allergies or dietary requirements)

.....
.....

I have received the following documents [delete or add as appropriate]:

- Parental consent for photographs
- Parental consent for specific activities eg. sports, whether or not a child is to be allowed to leave alone, etc.
- Parent/School agreement including information about attendance, homework, dress code, responsibilities of parents and of school, complaints procedure including who to contact re. complaints/suggestions
- Code of behaviour including disciplinary action and anti-bullying
- Safeguarding policy statement including designated child protection officer’s name and contact details
- E-Safety policy/guidance

Signed relationship to child.....Dated