



Croft Road, Hurworth on Tees Darlington DL2 2JG
 Tel: 01325 720424 Email: enquiries@hurworthschool.org.uk

Surname Forename
(Legal – name on birth certificate) (Legal – name on birth certificate)

Other Name (s) Chosen Name
(middle)

Telephone Date of Birth

Address
incl post code

Current School Sex Male Female

Please give details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Place them in the order you wish them to be contacted.

	Title	Name/Relationship	Home Address	Home Phone No.	Mobile Number	Daytime Phone No.	Parental Responsibility (Please tick)
1							
2							
3							

SIBLINGS (please advise names of any siblings and schools attended in the Darlington Authority)

Name School

Name School

Lunch Arrangements Please ✓ appropriate choice

Home School Packed Lunch Free School Meal

All entitlements to Free School Meals should be verified by the office.

Travel Arrangements – Please ✓ appropriate choice

Bicycle Train School Bus Public Transport Private Car Walk Other

Medical Details ** Some medical conditions may require the support of a care plan for your child. If you think your child's condition requires a care plan, please contact the school office

Doctor Telephone

Address

Medical Information

Religion First Language English as an additional language

Child's language spoken at home Other language spoken at home

Country of Birth Traveller Status

ETHNICITY DATA COLLECTION – Please study the list below and tick one box only to indicate the ethnic background of your child. It is not possible to list all ethnic groups. The list below reflects the main ethnic groups in Darlington. You are asked to choose the ethnic group which is closest to how you see your child/yourself.

White		Mixed/Dual Background	
English	WENG	White and Black Caribbean	MWBC
Irish	WIRI	White and Black African	MWBA
Traveller of Irish Heritage	WIRT	White and Asian	MWAS
Gypsy/Roma	WROM	Asian or Asian British	
Any other white background	WOTH	Indian	AIND
Black or Black British		Pakistani	APKN
Caribbean	BCRB	Bangladeshi	ABAN
African	BAFR	Any other Asian background	AOTH
Any other black background	BOTH	Any other Ethnic Group (please state which below)	OOTH
Chinese	CHNE	This information was provided by Parent <input type="checkbox"/> Student <input type="checkbox"/>	
Chinese	CHNE	I do not wish an ethnic background category to be recorded	REFU

Please complete each of the following sections – Please ✓ where appropriate

1. Are you prepared to give permission for your child to participate in educational visits?

Yes No

2. Any other information you would like us to know?

Internet Permissions – to maximise your child’s learning potential, students will be expected to access the school’s internet resources.

I agree to my child accessing the internet at school Yes No Do you have a computer to use at home

Do you have internet access at home Yes No

Photograph Permissions – to promote the success of our students, we are often asked for photographs; please ✓ as appropriate if you are happy for your child’s photograph to be used as follows: If this section is not completed we will assume your agreement.

in school publications in the school newspaper on the school website in the local newspaper

PARENT/GUARDIAN DETAILS (Please be aware of your responsibility to inform us of any changes)

Full Name of Mother/Guardian _____

Signature _____ Date _____

Full Name of Father/Guardian _____

For office use only :

Birth Certificate seen ? Y / N Serial Number : _____

Passport seen ? Y / N Serial Number : _____

Any other photographic evidence seen (where applicable) ? Y / N Serial Number : _____

I confirm that I have seen evidence of identity as above and to the best of my knowledge identity has been confirmed.

Name (print) : _____ Date : _____

Signed : _____ Designation : _____