



Please return to the School

Personal Information Form

Please complete in BLOCK CAPITALS

Roll Number _____ (*please leave blank*)

Surname _____

First Name _____

Other Names _____

Name by which your child is known _____

Gender Male ☐ Female ☐

Date of Birth _____

Country of Birth _____

Date student arrived in the Country _____

Student's Nationality _____

Home Address _____

Postcode _____

Home telephone number _____

Brothers or Sisters currently attend Bishop Stopford's School:

<u>Surname</u>	<u>First name</u>	<u>Year/House</u>
_____	_____	_____
_____	_____	_____

Please tick the name of the Borough in which you live:

Barnet ☐ Enfield ☐ Haringey ☐ Essex ☐

Hertfordshire ☐ Other _____ (*please specify*)

Family and Emergency Contact Details

Please let us know of any change in emergency contact details as soon as possible. It is essential that School can make contact with you quickly in an emergency.

Please complete in BLOCK CAPITALS

Emergency Contact : Parent/Carer 1

Mr/Miss/Mrs/Ms First Name :

Surname :

Relationship to child :

Address :

Home Telephone No. :

Mobile Number. :

E-Mail Address :

Work Number :

Emergency Contact : Parent/Carer 2

Mr/Miss/Mrs/Ms First Name :

Surname :

Relationship to child :

Address :

Home Telephone No. :

Mobile Number. :

E-Mail Address :

Work Number :

Emergency Contact 3

Mr/Miss/Mrs/Ms First Name :

Surname :

Relationship to child :

Home Telephone No. :

Mobile Number :

Previous schools which your child has attended:

Name of School : _____

Borough : _____ From _____ To _____

Name of School : _____

Borough : _____ From _____ To _____

Name of School : _____

Borough : _____ From _____ To _____

Please indicate whether a statement of special needs has been made for your child.

Yes ☐

No ☐

If your child has been the subject of any reports (Child Guidance, Social Services, Educational Psychologist, Medical Specialist, etc.) please state below the title and name of the person making the report, relevant dates and details of the report.

Additional information you wish the School to have :

Parent(s)/Carer(s) signature : _____

Data Protection:

We are collecting this data as required by the Education Act, various other laws and to ensure your child's safety. Data will be used in accordance with the school's privacy policy, available online our website, please ask if you want an accessible copy. Information may be shared with other schools, the Department for Education, Enfield council and our delivery partners to deliver education services or if required by law.