

Please complete & return to  
Mrs J Reynolds  
Brookfield School,  
Chatsworth Road,  
Chesterfield, S40 3NS  
Please contact the above if  
help is needed with this form.

# Brookfield Community School

## STUDENT/PARENT INFORMATION



**IMPORTANT: PLEASE COMPLETE EACH SECTION OF THIS FORM**

Full Legal Forenames ..... Student's Legal Surname .....  
*(Please circle preferred forename)*  
Student's Date of Birth ..... Male / Female ..... Home Tel No.....  
Student's Main Residential Address ..... Postcode .....

**The School now uses emails and text messaging as a means of communicating with Parents/Guardians. It is important to provide an email address and mobile telephone number as these are required for school to home communication.**

**PLEASE NOTE: Any contact person listed below as Priority 1 will receive texts and electronic communications as appropriate.**

**If Priority 1 does not have a mobile number the text message will be sent to a landline phone. We must have at least 2 additional emergency contacts.**

**MOTHER:** (Miss/Mrs/Ms) ..... **Legal Parental Responsibility ?** YES / NO  
Address: ..... Post Code: .....  
Home Tel No: ..... Mobile No: ..... Work No: .....  
*(Please circle which is the main contact number Home/Work/Mobile)*  
Priority 1 2 3 *Please circle priority contact (see note above)*  
Email Address: **(Please write clearly)**.....

**FATHER:** ..... **Legal Parental Responsibility ?** YES / NO  
Address: ..... Post Code: .....  
Home Tel No: ..... Mobile No: ..... Work No: .....  
*(Please circle which is the main contact number Home/Work/Mobile)*  
Priority 1 2 3 *Please circle priority contact (see note above)*  
Email Address: **(Please write clearly)**.....

**OTHER EMERGENCY CONTACT:**  
In the event of illness/injury, if neither parent is available, who should be contacted?  
Name: Mr/Mrs/Ms/Miss..... Relationship to the student: .....  
Address: ..... Post Code: .....  
Home Tel No: ..... Mobile No: ..... Work No: .....  
Priority 1 2 3 *Please circle*

**OTHER ADULTS:**  
If there are other adults **Legally** entitled / with **Parental Responsibility**, who should receive information about student progress, please tick the box and enter their names and contact details.   
Name: Mr/Mrs/Ms/Miss..... Relationship to the student: .....  
Address: ..... Post Code: .....  
Home Tel No: ..... Mobile No: ..... Work No: .....  
Priority 1 2 3 *Please circle*

**SCHOOL ATTENDED IMMEDIATELY BEFORE BROOKFIELD:** .....  
**BROTHERS/SISTERS WHO ATTEND(ED) BROOKFIELD:**  
Name: ..... Registration Group or Year of Leaving: .....  
Name: ..... Registration Group or Year of Leaving: .....

**PLEASE COMPLETE THE SECTIONS OVERLEAF → → → → →**

**LUNCHTIMES:**

Please circle the arrangements you have agreed with your child for lunchtimes. Only indicate the most frequent lunchtime arrangement.

**School Meal / Packed Lunch**

If you feel that you are eligible for Free School Meals, click on the Parents Section on our School Website for further information.

Special Dietary Requirements .....

**TRAVEL ARRANGEMENTS:**

Method of transport to school: this should be either the longest journey time where student uses more than one mode of travel, or the most frequently used, if a student uses different modes of travel in a week.

**Only tick ONE Box**

|                    |  |       |  |
|--------------------|--|-------|--|
| Car                |  | Taxi  |  |
| Car Share          |  | Train |  |
| Cycle              |  | Walk  |  |
| Public Bus Service |  | Other |  |

**PERMISSION FOR SCHOOL TO ADMINISTER FIRST AID IN AN EMERGENCY**

**YES / NO**

**DOCTORS:**

DR..... Tel No.....

Practice Name & Address.....

**MEDICAL CONDITIONS / DISABILITY:**

Please give details of any medical conditions, allergies, diabetes, epilepsy, asthma, hearing loss etc which should be known by the school to help care for the student.

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If your child suffers from a condition requiring medication in school, please refer to the Administration of Medicine Guidance on the School Website in Policies.

**SERVICE CHILDREN IN EDUCATION**

Please confirm if either of the student's parents are in the Armed Forces.

**YES / NO**

**PERMISSION FOR STUDENT TO LEAVE THE SCHOOL SITE IN THE EVENT OF AN EMERGENCY CLOSURE.**

In recent times we have had to close the school for reasons such as adverse weather. In this instance a student will not be released from the school site unless we have permission from the Parent/Guardian. Please complete the information below.

Please tick and complete ONE option only

|  |                                     |
|--|-------------------------------------|
| <b>Option</b>  | <input checked="" type="checkbox"/> |
| Allowed to leave and go directly home/relative               | <input type="checkbox"/>            |
| I wish my child to remain in school until they are collected | <input type="checkbox"/>            |

**ETHNICITY/CULTURAL:**

The Department for Education have asked us to invite you to specify the ethnicity, nationality & religion of your child. This information is collected in the school census. If you choose not to complete this section, please tick "Declined" from the option below.

Declined

**White:**

British  Irish

Gypsy/Roma  Traveller of Irish Heritage

Any other White background

**Mixed:**

White & Black Caribbean  White & Black African

White & Asian  Any other mixed background

**Asian or Asian British:**

Indian  Pakistani

Bangladeshi  Chinese

**Black or Black British:**

Caribbean  African

Any other Black background  Any other Ethnic background

Does your child speak English as an alternative language? **YES / NO**

If Yes, please give the name of the language spoken at home (mother tongue)

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**RELIGION:** .....

**ASYLUM STATUS**

Asylum seeker  Refugee

Not applicable

**TRAVELLER**

Yes  No

**YOUTH SUPPORT SERVICES:**

Do you agree to be contacted by the Youth Support Services E.g. Careers Service? **YES / NO**

**DATA PROTECTION:**

Under General Data Protection Regulations (GDPR), relevant information will be shared in line with the Privacy Notice (Please refer to the Redhill Academy Trust Privacy Notice: How we use student information on the School Website in Policies).

**PARENTAL UNDERTAKING**

The information provided is to the best of my/our knowledge correct. I/we will notify the school in writing if I/we wish the information/instructions to be varied at any time.

**Home School Agreement: (Year 7 only)**

(Available on the School Website in the Parent's / Primary Transition Section).

I have read, understand and agree with the Home School Agreement.

**Trips and Visits: (All Years)**

I/we understand that my/our child may leave the school premises for local visits within walking distance, i.e. local schools and/or sports fixtures and hereby give my consent for my child to participate in such visits.

I/we also understand that my/our child may leave the school premises at other times when I/we will be informed separately by letter and when further consent will be required from me.

I/we understand that during local visits my child will be either supervised directly by a member of staff or closely supervised within clearly defined boundaries, but will remain within a small group of students at all times and will be aware of the location of a supervising adult throughout.

I/we acknowledge that I/we have given my/our consent for my son/daughter to engage in a rolling programme or series of local visits. I/we understand that should any emergency contact details change or my/our son/daughter's medical situation change, I will notify the school.

**Student ICT Acceptable Use Policy – Student Agreement: (All Years)**

(Available on the School Website in the About Us/Policies Section).

I/we have read the agreement on student use of the Internet at Brookfield Community School and have discussed it with my child.

I/we understand that access is designed for educational purposes.

I/we recognise that while efforts will be made to monitor student use of the Internet it is impossible for the school to monitor and restrict access to all controversial materials.

I/we further accept that anyone bringing offensive material into the school via the internet must have done so deliberately and must accept responsibility for their actions.

I/we agree to my child using the school computer system to access the Internet within the terms of this agreement.

I accept that this consent can be withdrawn or amended at any time by writing to the school Headteacher or Data Manager.

**1<sup>st</sup> Parent/Guardian Signature** .....

**2<sup>nd</sup> Parent/Guardian Signature** .....

**Student Undertaking**

I have read, understand and agree with the rules on student use of the internet and the Home School Agreement at Brookfield Community School.

**Student Signature** .....

Form Completed By .....

Date Form Completed .....