**Unity College Student Registration Form**

All our college records are held on computer. The information given below will be treated in confidence and only used in accordance with our Data Protection Policy.

**Student Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname** |  | **Home Language** |  |
| **Forename(s)** |  | **Is English a 2nd Language?** |  |
| **Chosen Name** |  | **Religion** |  |
| **Date of Birth** |  | **Present School** |  |
| **Gender** |  | **Previous School(s)** |  |
| **Address** |  | **Names of siblings at Unity College** |  |
| **Postcode** |  |

 Is this child:

 In the care of the local authority? [ ]  Special Guardianship Order? [ ]

 Adopted from care? [ ]  Child Arrangement Order? [ ]

 In Service Child? [ ]  If Yes, from what year?

 I would describe my child’s ethnic origin as:

 White British [ ]  Bangladeshi [ ]  Indian [ ]  Pakistani [ ]

 Black African [ ]  Black Caribbean [ ]  Chinese [ ]

 Other [ ]  Prefer not to say [ ]

 Entitled to Free School Meals? [ ]

 Has your child received Free School Meals at any time in the last 6 years? [ ]

 If so, from what year

 Does your child have any dietary needs (e.g. halal, gluten free) or any food allergies?

 Mode of Travel WALK [ ]  CAR [ ]  BUS [ ]  CYCLE [ ]  TAXI [ ]  OTHER

 Do you have any involvement with outside agencies:

 Children Social Care [ ]  Other [ ]

 Please provide a contact name and telephone number

**Parent / Legal Guardian Details**

Please enter below the details of those who have **Parental Responsibility** for the child.

|  |  |  |
| --- | --- | --- |
|  | **Parent/Guardian 1** | **Parent/Guardian 2** |
| **Relationship to the child** |  |  |
| **Surname** |  |  |
| **Forename(s)** |  |  |
| **Title** |  |  |
| **Date of Birth\*** |  |  |
| **Address (incl. postcode)** |  |  |
| **Home Tel. Number** |  |  |
| **Mobile Number** |  |  |
| **Email address^** |  |  |
| **Work Place** |  |  |
| **Work Tel. Number** |  |  |
| **Which is the primary contact number during the college day?** | Home [ ]  Mobile [ ]  Work [ ]  | Home [ ]  Mobile [ ]  Work [ ]  |

\*Providing a date of birth will help to ensure that parents/guardians with the same name are stored correctly.

^This will be used to invite you to use our Parent App.

**Emergency Contact Details**

Please enter Emergency Contact details, including parents/guardians, **in contact order**. There is a legal requirement to provide at least **two** contacts, but please supply as many as you can.

1st Contact

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** |  | **Home Tel. Number** |  |
| **Relationship to child** |  | **Mobile Number** |  |
| **Date of Birth\*** |  | **Work Tel. Number** |  |
| **Which is the primary contact number during the college day?** | Home [ ]  Mobile [ ]  Work [ ]  |

2nd Contact

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** |  | **Home Tel. Number** |  |
| **Relationship to child** |  | **Mobile Number** |  |
| **Date of Birth\*** |  | **Work Tel. Number** |  |
| **Which is the primary contact number during the college day?** | Home [ ]  Mobile [ ]  Work [ ]  |

3rd Contact

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** |  | **Home Tel. Number** |  |
| **Relationship to child** |  | **Mobile Number** |  |
| **Date of Birth\*** |  | **Work Tel. Number** |  |
| **Which is the primary contact number during the college day?** | Home [ ]  Mobile [ ]  Work [ ]  |

4th Contact

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** |  | **Home Tel. Number** |  |
| **Relationship to child** |  | **Mobile Number** |  |
| **Date of Birth\*** |  | **Work Tel. Number** |  |
| **Which is the primary contact number during the college day?** | Home [ ]  Mobile [ ]  Work [ ]  |

\*Providing a date of birth for contacts will help to ensure that contacts with the same name are stored correctly.

|  |
| --- |
| **Parental Permission for my child to meet with external student support services** |
| I give permission for my child to meet with the student support services (both internal and external).  Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_For more information about sharing of information and data protection please see the college website at www.unity-college.com. |

|  |
| --- |
| **Parental Permission for your child to take part in lessons off school site** |
| During the school year your child may need to take part in some or all of the following,For example: PE lessons / Activities on local playing fields. Lessons in Towneley Park. Visits to other local colleges / Training Providers. I give permission for my child to attend lessons off the main college site as required. Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Religious Education Permission** |
| Elements of religious education are delivered through the college’s iD programme.I give permission for my child to take part in these lessons in accordance with College Policy. Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ |