

FOR OFFICE USE ONLY			
Admission Date			
Reg Group / Reg Class		Year	
House			
Scottish Candidate No.			
GIRFEC Establishment Contact			
In Zone	Yes		No
If No, Zoned School			
Date of Birth Confirmed			
Proof of Address Confirmed			



## ENROLLING YOUR CHILD FOR SCHOOL

**This form enables a school to register your child. The form asks for information that the school requires about your child and which will be held in your child's school file. It will also ensure that the school can contact you about your child's education.**

Information provided will enable staff to respond to your child's needs. You are required to complete all sections of the form. If there is any other information that you feel the school should have about your child, please include it on a separate sheet.

### Further Information

Further information about the school education in Aberdeen is contained in the publication 'A Guide to Education Services for Parents'. This is available from the school, Integrated Children's and Family Services, (Family Information Service) Frederick Street Centre, Ground Floor, Frederick Street, Aberdeen AB24 5HY. Tel: 01224 764803 [www.aberdeencity.gov.uk/fis](http://www.aberdeencity.gov.uk/fis)  
Email: [fis@aberdeencity.gov.uk](mailto:fis@aberdeencity.gov.uk)

### Who should complete the attached form?

- For children aged under 16 years it should be completed by an adult with whom the child is living - a parent, other person having parental responsibilities or rights, a foster carer or a member of Social Work staff.
- Young people aged over 16 years may complete the form in their own right.

### NAME OF THE SCHOOL YOU ARE ENROLLING YOUR CHILD IN

### NAME OF CHILD

# PUPIL ENROLMENT FORM

PLEASE CONTACT THE SCHOOL IF YOU REQUIRE HELP TO COMPLETE THE FORM

**PLEASE COMPLETE IN BLOCK CAPITALS**

## Pupil Details

Forename

Known As (If Different)

Surname

Date of Birth

Gender M/F

## Pupil's Home Address Details

House Name

Number & Street

Locality

Town

Post Code

Home Phone No

Pupil Mobile No

Pupil Email

## Name and Address (including country) of Previous Educational Establishment

If the above establishment was not in Scotland, has the pupil previously attended a Scottish Educational Establishment?

YES

NO

If yes, what is the Name & Address of the Scottish Educational Establishment

<b>Please give details of any brothers and sisters and the schools they attend</b>	Name	Date of Birth	School

## Parent/Guardian Contacts and Other Emergency Contact Details

Schools will send information concerning a pupil's progress at school to those on this form that have parental responsibilities and rights. **IMPORTANT:** If a pupil's natural parent has had parental responsibilities and rights removed by a Court, it is important that the school is aware of this. Please give this information confidentially to the Head Teacher, attaching copies of the relevant Court Orders.

Contact information for each child requires to be held within the school so that the correct person(s) may be contacted in the event of an emergency or illness, or for the purposes of correspondence including sending letters, issuing school reports and school information or in the event of school closure. The main contact will be the person who will receive all correspondence and will be the first point of contact – this does not necessarily have to be the parent or guardian. It is important to include:

1. The parents or guardians of the child. We have a duty to inform both natural parents of a child, please also include details of those not living at the home address.
2. At least one additional contact other than the parents/guardians who is available during the day in the event of an emergency (SOS Contact)
3. In the event of adverse weather, it may be necessary to make special arrangements to accommodate pupils nearer to school than to home. Nominate one person whom the child may return to the home of in the event of adverse weather.

### PRIORITY CONTACT 1 – this person will always be the first point of contact

Title	<input type="text"/>	Gender M/F	<input type="text"/>	Relationship to Pupil	<input type="text"/>
Forename	<input type="text"/>			Preferred Language	<input type="text"/>
Surname	<input type="text"/>				
Address	<input type="text"/>				
Post Code	<input type="text"/>	Day Phone No	<input type="text"/>		
Home Phone No	<input type="text"/>	Mobile No	<input type="text"/>		
Email address	<input type="text"/>				

Can this person be contacted in an emergency?  Should this contact receive a copy of pupil's report?  Does this person have Parental Rights?

Is this the nominated contact in the event of adverse weather (see notes above)?

**PRIORITY CONTACT 2 – this person will always be the second point of contact**

Title  Gender M/F  Relationship to Pupil

Forename  Preferred Language

Surname

Address

Post Code  Day Phone No

Home Phone No  Mobile No

Email address

Can this person be contacted in an emergency?  Should this contact receive a copy of pupil's report?  Does this person have Parental Rights?

Is this the nominated contact in the event of adverse weather (see notes above)?

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**PRIORITY CONTACT 3 – this person will always be the third point of contact**

Title  Gender M/F  Relationship to Pupil

Forename  Preferred Language

Surname

Address

Post Code  Day Phone No

Home Phone No  Mobile No

Email address

Can this person be contacted in an emergency?  Should this contact receive a copy of pupil's report?  Does this person have Parental Rights?

Is this the nominated contact in the event of adverse weather (see notes above)?

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Is any parent (or other person having parental responsibilities or rights) for the above pupil either a Regular  , Reserve  or Veteran  of the Armed Forces? (please tick if appropriate)

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**ADDITIONAL CONTACTS**

If you would like to list more additional contacts, please list these on a separate sheet

**Information to meet requirements of the Additional Support Needs Act 1994 and the Disability Discrimination Act 1995**

Declared Disabled Yes / No

Assessed Disabled Yes / No

*A person is disabled if they have a physical or mental impairment which has a substantial and long term (i.e. last for more than a year) adverse effect on their ability to carry out normal day to day activities.*

- |   |  |
|---|--|
| <input type="checkbox"/> Autistic Spectrum Disorder         | <input type="checkbox"/> Deaf / Blind                                    |
| <input type="checkbox"/> Communication Support Needs        | <input type="checkbox"/> Dyslexia  |
| <input type="checkbox"/> Hearing Impairment                 | <input type="checkbox"/> Language or speech disorder                     |
| <input type="checkbox"/> Learning Disability                | <input type="checkbox"/> Mental Health Problem                           |
| <input type="checkbox"/> Other Moderate Learning Difficulty | <input type="checkbox"/> Other Specific Learning Difficulty (eg numeric) |
| <input type="checkbox"/> Physical or Motor Impairment       | <input type="checkbox"/> Social, Emotional and /or Behaviour Difficulty  |
| <input type="checkbox"/> Visual Impairment                  |  |
| <input type="checkbox"/> Other – please specify             | <input type="text"/>   |

In order that the school can plan for the pupil's education needs it is important to know of any existing support involvement. This information is in the strictest confidence and may involve a meeting with the school.

e.g. Specialist educational support, Educational Psychology, Child & Family Psychiatry, Police, Social Work, (Please give contact names if possible).

Other Services – give details

Contact Name(s)

Additional Information

## HERITAGE

In accordance with Aberdeen City Council's Equal Opportunities Policy, the Education Authority collects information on the ethnic origin, national identity and language spoken at home of all pupils. This information is provided by you on a voluntary basis and will be used for monitoring and statistical purposes only. The categories listed are advised by The Scottish Government.

### Languages Spoken by the Pupil

Main Home Language

Other languages spoken at home

### Ethnic Origin of Pupil – Please Select -

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> White – Scottish        | <input type="checkbox"/> Other – Arab                       | <input type="checkbox"/> Asian – Other  |
| <input type="checkbox"/> White – Irish           | <input type="checkbox"/> Other – Ethnic Group               | <input type="checkbox"/> Asian – Bangladesh/British/Scottish                  |
| <input type="checkbox"/> White – Other British   | <input type="checkbox"/> Mixed or Multiple ethnic groups    | <input type="checkbox"/> Asian – Chinese/British/Scottish                     |
| <input type="checkbox"/> White – Polish          | <input type="checkbox"/> African – African/British/Scottish | <input type="checkbox"/> Asian – Indian/British/Scottish                      |
| <input type="checkbox"/> White – Gypsy/Traveller | <input type="checkbox"/> African – Other                    | <input type="checkbox"/> Asian – Pakistani/British/Scottish                   |
| <input type="checkbox"/> White – Other           | <input type="checkbox"/> Caribbean or Black – Other         | <input type="checkbox"/> Caribbean or Black – Caribbean /<br>British/Scottish |
| <input type="checkbox"/> Not disclosed           |   |   |

### Religion – Please Select -

- |   |  |                                 |                                 |
|---|--|---------------------------------|---------------------------------|
| <input type="checkbox"/> Buddhist               | <input type="checkbox"/> Hindu             | <input type="checkbox"/> Jewish | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Sikh                   | <input type="checkbox"/> Christian - Other | <input type="checkbox"/> None   |                                 |
| <input type="checkbox"/> Other – please specify | <input type="text"/>                       |                                 |                                 |

Roman Catholic Religious Education (RCRE) is delivered via peripatetic service in secondary schools.

If you prefer that this pupil receives Roman Catholic RE in secondary school, please tick this box.

### National Identity – Please Select -

- |   |                                  |  |
|---|----------------------------------|--|
| <input type="checkbox"/> Scottish       | <input type="checkbox"/> British | <input type="checkbox"/> English       |
| <input type="checkbox"/> Northern Irish | <input type="checkbox"/> Welsh   | <input type="checkbox"/> Not Disclosed |
| <input type="checkbox"/> Not known      | <input type="checkbox"/> Other   |  |

### Asylum Status -

- |  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Asylum Seeker | <input type="checkbox"/> Refugee |
|--|----------------------------------|

### Looked After -

In terms of the Children (Scotland) Act 1995, if the pupil is classified as being looked after by a Local Authority please specify if this is

- |                                  |    |   |
|----------------------------------|----|---|
| <input type="checkbox"/> AT HOME | or | <input type="checkbox"/> AWAY FROM HOME |
|----------------------------------|----|---|

## PUPIL MEDICAL DETAILS

**IMPORTANT:** Parents may convey relevant medical information on this form or on a separate sheet.

Name of Doctor's Surgery

Address & Telephone

Pupil's Medical Condition/  
Allergies

Information/Action on Medical  
Condition/Allergy or Health  
Needs that the school  
Should be aware of

## Why are we asking for your information?

Aberdeen City Council (ACC) collects personal data and information about your child in order to provide your child with a school education.

ACC will normally only share information (other than in child protection situations) in order to provide services for your child as part of his/her school education. We collect special category data about your child and process this because it is in the substantial public interest.

We have an agreement with Police Scotland, NHS Grampian, Moray Council and Aberdeenshire Council which governs how we share data with these partners. ACC's partner agencies can be found on our Education Web Site at <https://www.abernet.org/sharing-information/> with further details of the information that we share with each partner.

The information held by ACC is used to assess, plan, coordinate, deliver and quality assure the education services to your child. The Council does not use an automated process for making decisions about your child or the services required; decisions are made with you.

We will keep this information for a period of 5 years from the maximum school leaving age of your child, as required to by The Pupils' Educational Records (Scotland) Regulations 2003, unless we have a legal responsibility to keep the information for a longer period of time.

ACC will keep anonymised data beyond this period for the purposes of auditing service provision and quality assurance.

## Your Data, Your Rights

You've got legal rights about the way the Council handles and uses your data, which include the right to ask for a copy of it, inaccurate data to be update/amended, and to ask us to stop doing something with your data. Please contact the Council's Data Protection Officer by email [DataProtectionOfficer@aberdeencity.gov.uk](mailto:DataProtectionOfficer@aberdeencity.gov.uk) or in writing at: Legal and Democratic Services, Business Hub 6, Level 1 South, Marischal College, Aberdeen, AB10 1AB.

More information about all of the rights you have is available on our website at: <https://www.aberdeencity.gov.uk/your-data>.

You also have the right to make a complaint to the Information Commissioner's Office, ([www.ico.org.uk](http://www.ico.org.uk)). They are the body responsible for making sure organisations like the Council handle your data lawfully.

## Legal Basis for Processing

The Council, as an Education Authority, is legally required to deliver an education to your child under the terms of the Education (Scotland) Act 1980 as amended.

### **DECLARATION**

I declare that, to the best of my knowledge, the information provided by me upon this form is correct. I confirm that I have read and understood the above information.

\_\_\_\_\_  
**SIGNATURE OF PARENT / GUARDIAN**

\_\_\_\_\_  
**PLEASE PRINT NAME IN BLOCK CAPITALS**

\_\_\_\_\_  
**DATE**

**PLEASE NOTIFY THE SCHOOL IMMEDIATELY OF ANY CHANGES TO THE INFORMATION GIVEN WITHIN THIS FORM**