

THE MCAULEY CATHOLIC HIGH SCHOOL SIXTH FORM

Student Information for September 2019 Entry



PLEASE COMPLETE IN BLOCK CAPITALS

Surname _____ Forename _____ Middle Name/s _____
 (Legal Surname) (Legal Forename)

Home Address of child _____
 (including postcode) _____

Date of birth: _____ Gender: M/F (please circle) Current School: _____

Student Mobile Number: (optional)* _____
 * this will ONLY be used by the Sixth Form Team in case of emergency or to provide vital information

Please give details of everyone who has parental responsibility plus anyone else to be contacted in an emergency. Please give details of parents/carers first then other contacts, and place them in order of priority.

Please note, the majority of school correspondence to parents/carers is now sent out either by text or email, so where possible please ensure you provide an up to date email address and remember to keep us informed should either your email address or contact telephone numbers change.

Relationship to pupil	Mr/Mrs/Ms/ Miss /Other	Forename and Surname	Address (please include Postcode)	Telephone Number(s)	Parental Responsibility Yes/No
1)			Email : (Please print clearly)		
2)					

Alternative emergency telephone contact if we are unable to contact a parent/guardian:

Relationship to pupil	Mr/Mrs/Ms/ Miss /Other	Forename and Surname	Address (please include Postcode)	Telephone Number(s)	Parental Responsibility Yes/No
			Email :		

Health/Medical Details

Doctor: _____ Tel. No. _____

Practice: _____ Address: _____

Any allergies/illnesses/conditions or medication being taken: (please include dietary needs)

If you wish to speak in confidence about any medical condition please contact the school to discuss the matter. Telephone the Sixth Form team on 01302 537396 ext 161. Thank you.

Please tick the appropriate box to indicate how your child will normally travel to school

Train Bus Walk Car Taxi Bicycle Other _____
 (Please describe)

If school special bus – please state the route _____

School meals (please tick) Packed lunch School meal Off site

Other children in the same household attending The McAuley School at present

Surname	Forename	Form	Relationship to this student

Service Child

Does this child have a parent(s) in regular HM Forces military units? Yes No
(applies to children whose parents are Pstat Cat1 or Pstat Cat2)

Linked Agencies

It is important that all agencies who are working with a child work together to ensure better outcomes for that child. In order to do that, please identify any other agencies working with your child for example Social Care (i.e. Social Services)*, Youth Offending Team, CAMHS; Child and Adolescent Mental Health Services. Please list any agencies:

If you wish to speak in confidence about this please contact the school to discuss the matter. Telephone the Sixth Form team on 01302 537396 ext 161. Thank you.

If you indicated above that Social Care (Social Services) are involved in the care of your child, please tick if this child is 'In Care' (sometimes known as 'Looked After') or is a 'Child in Need' and state which Local Government Authority is responsible for this child below.

Child in Care Local Authority responsible: _____
Child in Need

Ethnic and Cultural

Religion: _____ Parish (**if Roman Catholic**) _____

Home Language: _____ First Language: _____ English as Additional Language

Country of Birth: _____ Nationality: _____

Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, language, culture and ancestry or family history. **Ethnic background is not the same as nationality or country of birth.** The Information Commissioner recommends that young people aged 11 years old or above have the opportunity to decide their own ethnic identity. Parents, or those with parental responsibility, are asked to support or advise those children aged over 11 in making this decision wherever necessary. Please tick one box only, in the **Ethnicity** category below.

<p>White</p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Traveller of Irish Heritage</p> <p><input type="checkbox"/> Gypsy/Roma</p> <p><input type="checkbox"/> Greek/Greek Cypriot</p> <p><input type="checkbox"/> Turkish/Turkish Cypriot</p> <p><input type="checkbox"/> Western European</p> <p><input type="checkbox"/> Eastern European</p> <p><input type="checkbox"/> Other</p> <p>Mixed</p> <p><input type="checkbox"/> White & Black Caribbean</p> <p><input type="checkbox"/> White & Black African</p> <p><input type="checkbox"/> White & Asian</p> <p><input type="checkbox"/> Any other mixed background</p>	<p>Chinese</p> <p><input type="checkbox"/> Hong Kong Chinese</p> <p><input type="checkbox"/> Other Chinese</p> <p>Black or Black British</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Any other Black background</p> <p>Asian or Asian British</p> <p><input type="checkbox"/> Indian</p> <p><input type="checkbox"/> Pakistani</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Any other Asian background</p>	<p>Any Other Ethnic Background</p> <p><input type="checkbox"/> Afghan</p> <p><input type="checkbox"/> Arab</p> <p><input type="checkbox"/> Filipino</p> <p><input type="checkbox"/> Iranian</p> <p><input type="checkbox"/> Japanese</p> <p><input type="checkbox"/> Malay</p> <p><input type="checkbox"/> Thai</p> <p><input type="checkbox"/> Any Other Ethnic Group</p> <p><input type="checkbox"/> I do not wish an ethnic background group to be recorded</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Any information you provide will be used solely to compile statistics on the school careers and experiences of pupils from different ethnic backgrounds, to help ensure that all pupils have the opportunity to fulfill their potential. These statistics will not allow individual pupils to be identified. From time to time the information will be passed on to the Local Authority and the Department for Education (DfE) to contribute to local and national statistics. It is important that a students' first contact informs the sixth form office on ext 161 as soon as there are any changes to the information provided. Alternatively please email sixthform@mcauley.org.uk

I understand that continuation into Year 13 depends on satisfactory completion of Y12 and meeting the Y13 continuation criteria e.g. good AS level grades in at least 3 subjects.

Signature: _____ (Student) Date _____

Signature: _____ (Parent/Guardian) Date _____