

## **CONFIDENTIAL INFORMATION FORM**

All information received in this form will be treated in confidence.

Child's full name	
Name of first signatory	
(as appears on the registration form)	
Name of second signatory	
(as appears on the registration form)	

Please disclose any medical conditions and/or allergies affecting your child. Please provide us with as much detail as possible in the box below, and any relevant documentation such as medical reports, assessments etc:

Details of medical conditions and/or allergies				

If applicable to your child, it will also help us plan for their arrival please let us know of any:

Learning difficulty	No	Yes	(If Yes, please give information overleaf)
Special educational need	No 🗌	Yes	(If Yes, please give information overleaf)
Disability	No	Yes	(If Yes, please give information overleaf)
Behavioural, emotional and / or social difficulty	No 🗌	Yes	(If Yes, please give information overleaf)
Dietary Requirements	No 🗌	Yes	(If Yes, please give information overleaf)

First Language spoken at home	
Second Language spoken at home	

Please provide as much detail as possible in the box below.

Further details			

The information provided above will enable the School to consider any adjustments that it may need to make to assist your child to partake in the School's admissions procedure or when he / she enters the School.

Prior to the commencement of the admissions process, we will contact you about any special arrangements your child may require.

The information requested on this form is needed because the School has contractual and statutory duties towards your child. For more information about how the School will use your information, and your child's information, please see our pupil privacy notice and our parent privacy notice. Both of these documents are provided with the letter of offer and published on the School's website: https://www.stdavidsschool.co.uk/about-us/privacy-notice/.