**The Knights Templar School Sixth Form**

**Year 12 Data Collection Sheet**

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| **Surname:** |  | **Legal Surname:** |  |
| **Forename:** |  | **Middle Name:** |  |
| **Preferred Name:** |  | **Gender:** |  |
| **Date of Birth:** |  | **Year:** | **12** | **Reg Group:** |  |
| **Address:** |  |
| **Post Code:** |  |
| **UCI Number:** | (13 digit number – found on your exam timetable/GCSE exam results) | **ULN Number:** | (10 digit number – found on your exam timetable/GCSE exam results) |
| **Student mobile telephone:** |  | **Student** **e-mail:** |  |

Please give details of all persons who have parental responsibility and anyone else that should be contacted in an emergency. Place them in the order that you wish them to be contacted.

***Any additional information should be attached on a separate piece of paper.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Priority** | **Title** | **Name & relationship to student** |  |
| **1** |  |  | **Home address** |
| **Telephone number** |
| **Mobile number** |
| **Email** |
| **2** |  |  | **Home address** |
| **Telephone number** |
| **Mobile number** |
| **Email** |
| **Priority** | **Title** | **Name & relationship to student** |  |
| **3** |  |  | **Home address** |
| **Telephone number** |
| **Mobile number** |
| **Email** |

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| **Ethnicity:** *eg. White British; Indian; White & Black Caribbean; White & Asian; Black African; White other* | **First language:** |

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| **Name of medical practice:** |  |
| **Address:** |  |
| **Telephone number:** |  |
| **Medical condition(s), medications, disabilities:** |

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| **Do you have any diagnosed special needs?***i.e. dyslexia, autism, ADHD, dyspraxia, visual or hearing loss.* | Please specify; |
| **Were you eligible for Access Arrangements in your GCSEs? If yes, please tick.***Evidence from your previous school will be requested by KTS.* |  | A reader |  | A scribe |
|  | Extra time |  | Laptop |
|  | Modified papers |  | Rest breaks |
|  | Separate room | Other; |

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| **Data Protection:** In accordance with General Data Protection Regulation and current Data Protection Act, the school has a duty to protect this information and keep it up to date. The school is required to share some of the data with the Local Authority and with the DfE. For further information, please refer to the Privacy Notice on the school’s website.  |
| **Signature:** | **Date:** |

Please return to the Sixth Form Office in an envelope marked confidential if preferred. We may need to contact you for further information in due course.