States of Guernsey Education Resources

and Estates Management

St Martin's Primary School

School Lane, St Martin's, GY4 6HN Tel. 01481 756060 E-mail: office@stmartins.sch.gg

REGISTRATION FORM

The current Primary Admissions Policy is available at www.gov.gg/schooladmissions or on request from Sir Charles Frossard House, La Charroterie, St Peter Port, GY1 1FH. Your child will not be allocated a place at any States of Guernsey school unless you complete and return this form.

The information given on this form is **CONFIDENTIAL** and is requested to enable us to do our best for yourchild. Please return it to **St Martin's Primary School** as soon as possible. **Please note:** it is essential that you include your post code for administration purposes.

PLEASE INCLUDE: a copy of a Guernsey utility bill (dated within the last 3 months), driving licence *or* passport, and a copy of your child's birth certificate *or* passport.

IF COMPLETING BY HAND PLEASE WRITE IN BLOCK CAPITALS

There is a possibility that the number of requests for places at the School may exceed the number of places available. If so, and you would consider another school, please indicate below the school that you would wish your child to be considered for:

If you wish to apply for placement at a school other than St Martin's Primary School irrespective of the availability of places, please complete a PC-OCAPS request form, available from www.gov.gg/schooladmissions, and return it to Education Resources.

Child's	surname:

Male:

Name known by:

Child's forename/s:

Date of birth (DD/MM/YYYY):

Religion:

Please state ethnic group (e.g. White, Black, Asian etc):

Female:

N.B. Ethnicity is not the same as 'nation of origin' or race but is normally defined in relation to a people or culture with which a person or their forebears, most strongly identify.

Child's current home address:

Home Tel No:

English is first language: Yes No If No, please state first language: Child's

position in family (e.g. 3 rd of 4):

Names of brothers and sisters currently attending St Martin's Primary School:

Sibling house/sports colour:

Mother's name and title:

Address:

Email address:

Father's name:

Address:

Email address:

Mobile Tel No:

Home Tel No:

Home Tel No:

Mobile Tel No:

PLEASE INDICATE THE ORDER IN WHICH YOU WISH US TO CONTACT YOU SHOULD YOUR CHILD BE ILL OR IN THE EVENT OF AN EMERGENCY:					
Contact name and relationship to child (e.g. Mother, Father, Grandparents):					
1. Но	me Tel No:	Work	Tel No:		
Ν	Aobile No:				
2. Hoi	me Tel No:	Work	Tel No:		
1	Mobile No:				
3. Но	me Tel No:	Work	Tel No:		
Ν	/lobile No:				
4. Но	me Tel No:	Work	Tel No:		
Ν	Aobile No:				
Present nursery, pre-school or school:					
Address:					
Doctor's name: Surgery:					
Medical information e.g. allergies, medical conditions (asthma, diabetes, epilepsy etc.), medication:					
Any other relevant information:					
Registration can only be accepted if accompanied with the following – please tick to indicate enclosed documents.					
Proof of address/ID: Utility Bill (within last 3 months) and Driving Licence or Passport					
Together with: Child's Birth Certificate or Passport					
In order to comply with the provisions of the Children (Guernsey and Alderney) Law, 2008, wherever possible we require the signature of each person with parental responsibility.					
I confirm that the information I have provided is correct to the best of my knowledge. I understand that the provision of incorrect information may lead to my child being re-allocated to a different school.					
Signed:	Mother/Fa (delete as a	ther/Carer ppropriate)	Date:		
Signed:		ther/Carer appropriate)	Date:		

ONE FORM PER CHILD SHOULD BE SUBMITTED FOR REGISTRATION AT ONE SCHOOL ONLY

Data Protection – the States of Guernsey will process any personal data that you provide, in accordance with the Data Protection (Bailiwick) of Guernsey) Law, 2017. Further information about how your personal data is processed by the States of Guernsey can be found on www.gov.gg/DP

For office use only:	
Date Admission received:	Admission Number:
Birth Certificate/Passport: Yes/No	Baptismal Certificate: Yes/No/NA
Utility Bill/Driving Licence/Passport: Yes/No	