

#### PLEASE COMPLETE IN BLOCK CAPITALS

Child's Full Name (please include middle names)	
Child's Name – Known As (if different from forename)	
Child's Date of Birth	Child's Gender (please tick one)  Male Female
Child's Address	
Postcode	Home Telephone Number
Birth Certificate Number	Where was birth certificate issued? (e.g. Wales)
Does your child have a long-term medical illness, medical  ☐ Yes ☐ No	al condition, disability or allergies? (Please tick one)
If yes, please give details:	
Has there been a professional assessment confirming di  ☐ Yes ☐ No	sability? (Please tick one)
Does your child have a Co-ordinated Support Plan (CSP)  ☐ Yes ☐ No	? (Please tick one)
Name and Address of Doctors Surgery:	



Parent/Carers Full Name (please include middle names)				
Title	Parent/Carer Gender (please tick one)			
Parent/Carers Address (if different from child)				
Postcode	Home Telephone Number			
Daytime Telephone Number	Mobile Telephone Number			
Can you be contacted in an emergency?  ☐ Yes ☐ No	Relationship to child (e.g. Mother/Father/Aunt)			
Email Address				
Parent/Carers Full Name (please include middle n	ames)			
Title	Parent/Carer Gender (please tick one)			
Parent/Carers Address (if different from child)				
Postcode	Home Telephone Number			
Daytime Telephone Number	Mobile Telephone Number			
Can you be contacted in an emergency?  ☐ Yes ☐ No	Relationship to child (e.g. Mother/Father/Aunt)			
Email Address				



Additional information regarding your choice of early learning and childcare centre:				
Home Language:	Does the child need support with English Language (please tick one)  Yes No			
Please list all other languages spoke	n at home:			
I declare the information entered on this purposes detailed below.	form to be correct and consent to the information being used for the			
Name of person completing form:				
Signature:				
Date:				



#### **Child Ethnic Background (please tick one)**

	White – Scottish
	White – Irish
	White – Other British
	White – Polish
	White – Other
	White – Gypsy/Traveller
	African – African/British/Scottish
	African – Other
	Asian – Bangladeshi/British/Scottish
	Asian – Chinese/British/Scottish
	Asian – Indian/British/Scottish
	Asian – Pakistani/British/Scottish
	Asian – Other
	Caribbean or Black – Caribbean/British/Scottish
	Caribbean or Black – Other
	Mixed or Multiple ethnic groups
	Other – Arab
	Other – Other
	Not Disclosed
	Not Known
Ш	Other
Child N	ational Identity (please tick one)
	British
_	English
	Northern Irish
	Scottish
	Welsh
	Not Disclosed
	Not Known
	Other
61 11 1 4	
Child As	ylum Status (please tick one)
	Asylum Seeker
	Refugee
Child Re	eligion (please tick one)
	Buddhist
	Christian
	Hindu
	Jewish
	Muslim
	Sikh
	No religion
	Not Disclosed
	Other Religion



#### **CHECKLIST**

Have you completed all sections within this form? If not the form will be returned to you
Do you have your child's birth certificate? Attach a copy to this form before returning
Have you taken the JobCentre Plus form to your job centre for them to stamp and complete? Attach to
this form before returning
Have you signed and dated the form?
Have you completed the Equality section?
If applicable – have you included a copy of the Guardianship Order?

Please return this completed form along with a copy of your child's birth certificate and the completed JobCentre Plus form to Education and Social Care, Moray Council, Council Offices, High Street, Elgin, IV30 1BX

Information on children and parents/carers is stored securely on a computer system. The information gathered is subject to the terms of the Data Protection Act 1998.

The information may be used for teaching, registration, assessment and other administrative duties. The information is shared with Moray Council for administrative and statistical purposes. Extracts of the information are shared with a range of partners such as the NHS (for the dental and child health immunisation programmes). Information is also shared with The Scottish Government for statistical and research purposes, although individual children are not identified. It is your responsibility to update the ELC centre or school of any changes.

The Data Protection Act ensures that information is collected fairly and lawfully, is accurate, adequate, up to date, not held for longer than necessary, and may only be disclosed in accordance with the Codes of Practice. For more information contact the Administrative Manager,

Education and Social Care, The Moray Council, Council Headquarters, Elgin, IV30 1BX.

A copy of the Data Protection Regulations can be found here https://www.gov.uk/data-protection

MORAY COUNCIL USE ONLY							
Birth Certificate seen?	YES / NO CI		Checked by:				
			(signature of verifier)				
DWP Claimant Check form	YES / No	0	Checked by:				
completed?			(signature of verifier)				
Guardianship Order Seen?	YES / No	0	Checked by:				
			(signature of verifier)				
Funding start date	AUGUST			JANUARY		APRIL	
(please tick one)	2018			2019		2019	

A child whose date of birth is between:	Will be eligible for a funded place from:
1 March 2016 and 31 August 2016	14 August 2018
1 September 2016 and 31 December 2016	07 January 2019
1 January 2017 and 28 February 2017	15 April 2019