



Shevington High School

Data Collection Booklet

Student Name: _____

Previous School _____

Pupil Information

Legal surname: _____ Legal forename: _____
Preferred surname: _____ Preferred forename: _____
Date Of Birth: _____ Gender _____
Home address including postcode:

Postcode: _____
Home telephone number: _____

Contact Information

Name of parents/carers with whom student lives with at the students main residential address:

Contact 1

Name: (Mr/Mrs/Miss/Ms) _____
Relationship to student: _____
Legal parental responsibility: Yes No
Signature: _____
Email address: _____
Main contact number: _____

Contact 2

Name: (Mr/Mrs/Miss/Ms) _____
Relationship to student: _____
Legal parental responsibility: Yes No
Signature: _____
Email address: _____
Main contact number: _____

Additional contacts:

Name: (Mr/Mrs/Miss/Ms) _____
Relationship to student: _____
Contact number: _____

Name: (Mr/Mrs/Miss/Ms) _____
Relationship to student: _____
Contact number: _____

Additional information

Is the student a looked after child (Local Authority involvement) Yes No
 Is the student a post looked after child (e.g. adopted from care?) Yes No

Answers to the above question are optional.

Is your child entitled to a Free School Meal? Yes No

Please see additional information and forms to complete on page 6 - 8

Usual mode of transport to school: Bus Walk Cycle Taxi Car

Is anyone with legal responsibility for the student currently serving in the HM forces or has done so

in the last 6 years or receiving a force pension? Yes No

Students Ethnicity

White British	<input type="checkbox"/>	White & Black Caribbean	<input type="checkbox"/>	Any other White background	<input type="checkbox"/>
White Irish	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>	Any other Black background	<input type="checkbox"/>
White Other	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>
Black Caribbean	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Any other Mixed background	<input type="checkbox"/>
Black African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Any other ethnic group	<input type="checkbox"/>
Black Other	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Prefer not to disclose	<input type="checkbox"/>

Student's main language spoken at home _____

ICT Policy

I will only use my own username or password to log on to the service.

I will keep my username and password secret.

I will not give personal details (like my home address or mobile phone number), or the personal details of any other person, to anyone by using the network.

I will only download, use or upload material when I have been given the owner's permission.

I will only view, download, store, distribute or upload material that is lawful, and appropriate for other users. If I am not sure about this, or come across any potentially offensive materials, I will inform the school's ICT support team.

I will always respect the privacy of other Users.

I will avoid any acts of vandalism on or to the Service. This includes, but is not limited to, uploading or creating computer viruses and mischievously deleting or altering data from its place of storage.

I will be polite and appreciate that other Users might have different views to my own. I understand that the use of strong language, swearing or aggressive behaviour is not permitted.

I will use the discussion forums for exchanging information and constructive debate only.

I will report any incident that breaches this Acceptable Use Policy immediately to the school's ICT support Team.

I will only use the tools provided by the School for the purpose for which they are intended. In particular I will not use them to gain the logon details for other users or for creating defamatory material.

Student Signature _____

Date _____

Permissions

School Visits and Trips Declaration

Do you give consent for your child to attend 'non adventurous' school trips - please see attached document for further information

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Biometric cashless catering system

Please ensure you have read, understood and signed the attached Biometric Policy and return with this form.

<input type="checkbox"/>	<input type="checkbox"/>
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* I give permission for from my child's facial recognition to be taken and the information used by Shevington High School as part the school's cashless catering system. I understand that I may withdraw consent at any time in writing.

In the event you select no to the above question your child will be issued with a pin number.

Internet Policy

* Please confirm you have discussed and understood the ICT acceptable policy with your child. See Page 2

<input type="checkbox"/>	<input type="checkbox"/>
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School photography and use of images

* I AGREE to images of my child being used on the schools website, social media channels, newsletters, promotional material and on display in and around the school building.

<input type="checkbox"/>	<input type="checkbox"/>
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Consent to using your child's images will last throughout your child's time at the school and will continue to apply for a short time after they leave (except for images published for historical purposes which may be kept for an extended period of time to show the history of the school).

You can withdraw your consent at any time and can do so by writing to the Data Officer asking them to stop using your child's images. At that point they will not be used in future publications but we cannot prevent them from continuing to appear in publications already in circulation. The data collection Guidance booklet can be found on our web page.

Additional Permissions

Do you give permission for your child to be involved in Sex Education classes?

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Do you consent to us sharing your child's data with external organisations i.e.. Exam Boards?

Do you consent to us administering First Aid to your child or calling an ambulance, if needed?

Parental Signature

Print

Medical Notes / Health Care Plan

Only complete if your child has a **DIAGNOSED** medical condition that affects school life

Doctors name: _____ Surgery name: _____

Surgery address: _____

Postcode: _____ Telephone No: _____

Please detail any conditions below

Allergies: _____

Care needs (if an Independent Health Care Plan exists please provide school with a copy)

Emergency procedure if applicable: _____

Medical conditions that may affect school life?

Condition	Impact

Other information: e.g. triggers, side effects... _____

Medication

Condition	Drug/Medicine	Dosage	When?/How?	Storage instructions

Possible side effects of medication? _____

Permission for staff to administer medication? Parent/carer name: _____

Signed: _____ Date: _____

Specialist nurse/teacher

Name: _____ Relationship: _____

Work phone number: _____ Mobile phone number: _____

Email: _____

Additional Documents

Are there any additional documents attached? Yes No

If so, what? Please list: _____

Dietary needs - does your child have any dietary needs that school may need to be aware of?

Free School Meals

Dear Parent/Guardian

We want to make sure we are providing your child with the best education and support we can. Healthy school food has obvious health benefits and can help pupils establish healthy habits for life. Healthy school food can also help improve pupils' readiness to learn.

Families who receive certain benefits may be eligible for free school meals. Your child is eligible for Free school meals if you are in receipt of one of the following benefits:

- Universal Credit with an annual net earned income of no more than £7,400
- Income support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Support under Part 6 of the Immigration and Asylum Act 1999
- The guarantee element of Pension Credit
- Working tax Credit run-on (paid for the four weeks after you stop qualifying for Working tax Credit)
- Child Tax Credit (with no Working tax Credit) with the annual income of no more than £16,190

Registering for free meals could also raise an extra £955 for your child's secondary school, to fund valuable support like extra tuition, additional teaching staff or after school activities.

The additional money is available from central government for every child whose parent is receiving one of the benefits listed above.

To check if your child is eligible, we need information about you and your child. Please complete this form and return to your child's school.

Application for Free School Meal Eligibility and Pupil Premium



This form will allow the Local Authority to check and then subsequently advise your child's school if they are eligible to receive a free school meal. This is so that the school can claim for the pupil premium funding.

Important: If you do not wish to claim a free school meal we will still share the eligibility status with your school to enable them to claim the pupil premium funding. This may be the case for children in Reception, Year 1 and Year 2 who are entitled to universal free school meals.

Universal Credits: If you are currently receiving Universal Credits please take into school the letter of confirmation in addition to completing the form below. All parents in receipt of Universal Credits are entitled to claim free school meals for their children in the interim. The DWP and DfE intend on publishing a threshold of income in the future and so your entitlement to free school meals may change once this is published.

Please complete the details below in full and return to your child's school.

Part 1

Parent 1								
National Insurance Number	.							
National Asylum Support Service Number								
Surname (Block Capitals)								
Forename (Block Capitals)								
Date of Birth (DD/MM/YYYY)								

Parent 1								
National Insurance Number								
National Asylum Support Service Number								
Surname (Block Capitals)								
Forename (Block Capitals)								
Date of Birth (DD/MM/YYYY)								

If you are entitled, do you wish to claim a free school meal for your child(ren)?

Yes / No

Signature: _____

Date: _____

How we will use your data

- The Local Authority will use the information above to carry out a check that will be used to determine whether your children are currently eligible for Free School Meals/Pupil Premium
- Please note that this check does not affect any benefits you may be receiving and does not inform the school or the Local Authority of any details of these benefits
- The information will be stored securely and will only be accessed by those responsible for undertaking this check
- The information will be retained until the children listed have left education in Wigan LA with the purpose of carrying out both an initial check and subsequent re-checks during this time
- If your circumstances or details change it is important that you notify the school immediately as a re-check will be necessary and if this results in your child no longer being eligible for a free school meal, you will be informed by the school
- If your circumstances or details change and you feel your child may now be eligible for free school meals again, please reapply using this form
- If you wish to find out more on what the Local Authority does with your data please refer to our Privacy Notice on our website at: www.wigan.gov.uk

Part 2**Child(ren)'s details** (please use block capitals)

Forename			Surname	
Date of Birth				
UPN (the school will complete this)				

Forename			Surname	
Date of Birth				
UPN (the school will complete this)				

Forename			Surname	
Date of Birth				
UPN (the school will complete this)				

Forename			Surname	
Date of Birth				
UPN (the school will complete this)				

Part 3

to be complete by the school

School Name				
School DFE Number				

Office Use Only

CTF requested from previous school

CTF Imported

FSM Checked

Heads of Year to Complete

Registration Group

English Set

Maths Set

Science Set

Options if applicable



Shevington High School

Biometric Policy

Policy agreed/adopted:	
Committee/Governing Body:	Asset Committee
Next review:	September 2025

SHEVINGTON HIGH SCHOOL

Headteacher: Mr J Bennett

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facebook.com/shevingtonhigh



twitter.com/shevingtonhigh

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This policy was developed in conjunction with the school appointed DPO, Judicium Ltd.

What is biometric data?

Biometric data means personal information about an individual's physical or behavioural characteristics that can be used to identify that person – this can include fingerprints, facial shape/recognition, retina and iris patterns and hand measurements, etc.

All biometric data is considered to be special category data under the UK General Data Protection Regulations (GDPR). This means the data is more sensitive and requires additional protection as this type of data could create more significant risks to a person's fundamental rights and freedoms.

This policy complies with the Protection of Freedoms Act 2012 (sections 26-28), the Data Protection Act 2018 and the UK GDPR.

What is an automated biometric recognition system?

An automated biometric recognition system uses technology which measure an individual's physical or behavioural characteristics by using equipment that operates 'automatically' (i.e. electronically). Information from the individual is automatically compared with biometric information stored in the system to see if there is a match in order to recognise or identify the individual.

Legislation under UK GDPR

'Processing' of biometric information includes obtaining, recording or holding the data or carrying out any operation or set of operations on the data including (but not limited to) disclosing, deleting, organising or altering it.

As biometric data is a special category data, in order to lawfully process this data, School must have a legal basis for processing personal data and a separate condition for processing special category data. When processing biometric data, the school relies on explicit consent (which satisfies the fair processing conditions for personal data and special category data).

Consent is obtained using the Transition Data Form, prior or upon admission to Shevington High School.

The school process biometric data with the aim to make significant improvements to canteen and lunch/break facilities and ensuring effective and efficient service delivery for students and remove the need for swipe cards and/or cash that can be easily lost and used by others if found, thus safeguarding students.

Consent and Withdrawal of Consent

School will not process biometric information without prior relevant consent.

Student consent

When obtaining consent for student, parents will be notified that schools intends to use and process their child's biometric information. School only requires written consent from one parent (in accordance with the Protection of Freedoms Act 2012), provided no parent objects to the processing.

If a parent objects to the processing, then School will not be permitted to use the student's biometric data and alternatives will be provided (i.e. keypad facility).

Students may also object to the processing of their biometric data. If a student objects, school will not process or continue to process their biometric data, irrespective of whether consent has been provided by the parent(s).

Where there is an objection, school will provide reasonable alternative which will allow the student to access the same facilities that they would have had access to had their biometrics been used.

Students or parents can also object at a later stage to the use of the biometric data. Should a parent wish to withdraw their consent, they can do so in writing to school at enquiries@shevingtonhigh.org.uk requesting that school no longer uses their child's biometric data.

Students who wish for school to cease using their biometric data do not have to put this in writing but should inform the Head of Year or Mrs D Wynne, School Business Manager.

The consent will last for the time period that the student attends school, unless it is withdrawn.

Retention of biometric data

Biometric data will be stored by school for as long as consent is provided (and not withdrawn). Once a student/staff member leaves Shevington High School, the biometric data will be deleted from the school's system no later than 72 hours.

Storage of biometric data

At the point that consent is withdrawn, school will take steps to delete the biometric data from the system and no later than 72 hours.

Biometric data will be kept securely and systems will be put in place to prevent any unauthorised or unlawful access/use.

Biometric data is only used for the purposes for which it was obtained and such data will not be unlawfully disclosed to third parties.

Appendix 1 – Student consent form (for parent/carer)

Please complete and sign below if you consent to Shevington High School taking and using information from your son/daughter's in the form of a photograph as part of our facial recognition system. This biometric information will be used by the school for the purposes of charging and recording of school meals.

In signing this form, you are authorising school to use your child's biometric information for this purpose until he/she either leaves the school or ceases to use the system.

If you wish to withdraw your consent at any time, this must be done so in writing and addressed to Mrs D Wynne (School Business Manager) at enquiries@shevingtonhigh.org.uk. Once your child ceases to use the biometric facial recognition system, biometric information will be securely deleted by school no later than 72 hours.

Please note – students can object or refuse to allow their biometric data to be taken/used and if they do this, we will provide them with an alternative method of accessing relevant services. This will be discussed with your or your child (depending on their age and their understanding of their data rights) within school. However, we would encourage you to also discuss this with your child at home to ensure that they are aware of their right to refuse or to change their mind at any time.

For further information on the processing of biometric data, please refer to our Biometric Policy available on the school website.

Parental Consent

I confirm that I have read the above guidance information and I give consent to information in the form of a photograph of my child being taken and used by school for use as part of an automated facial biometric recognition system.

I understand that I can withdraw this consent at any time, in writing.

Name of student: _____

Name of parent/carer _____

Signature of parent/carer _____

Date _____

Please complete and return to school.

Shevington High School Master Consent Form

Trip



Student First Name _____

Student Last Name _____

Form _____

Would you like to give consent to cover all trips that your child may attend? Please circle your answer to the right.

Yes

This consent covers trips like theatre visits and museum visits, it does not cover any overnight or adventurous activities and we will contact you for further consent. If you do not wish to give master consent we will contact you for consent each time your child goes on a trip.

No

Please be aware that by signing this form you acknowledge that it is your responsibility to keep the school updated on the below-

Medical Conditions

Dietry Requirements

Allergies

Emergency Contacts

Signed _____

Printed _____

Relationship to child _____

Date _____

This form will need to be completed annually for each academic year.