

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 application form)	
Name of second signatory (as appears on the application form)	

Please disclose any medical condition, health problem or allergy affecting your child.

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

• learning difficulty • special educational need • disability • behavioural, emotional and / or social difficulty.

The information provided in this form 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 she enters the School.

Please provide us with as much detail as possible in the space below. Where possible, please provide any relevant documentation such as medical reports, assessments etc.

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: www.wgs.org.