



SHIRLEY HIGH SCHOOL PERFORMING ARTS COLLEGE

Our Vision:

To develop aspirational learners who strive for excellence academically, creatively and culturally, benefitting from a wide range of opportunities led by inspirational educators.

Form ESD

CONFIDENTIAL

SHIRLEY HIGH SCHOOL – PERFORMING ARTS COLLEGE

ETHNIC STUDENT DATA

Student Name: _____ Tutor Group (if known): _____

Date of Birth: _____ Male Female

1. **ETHNIC GROUP** – Please state the ethnic background to which you consider your child belongs:

Black African		Gypsy/Roma		White and Asian		Any other Asian background	
Bangladeshi		Indian		White and Black African		Any other Black background	
White British		White Irish		White and Black Caribbean		Any other mixed background	
Black Caribbean		Pakistani				Any other White background	
Chinese		Traveller of Irish Heritage		Any other ethnic group	Please state.....		

NB: The DfEE states that ‘People descended from more than one ethnic or racial group should be asked to indicate to which they consider they belong, or else to use the ‘Any other ethnic group’ box giving details.

I do not wish an ethnic background category to be recorded:

2. **MAIN LANGUAGE(S) SPOKEN IN THE HOME** – Please state:.....

Any other language spoken by your child other than the above:

1. <input type="text"/>	2. <input type="text"/>
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I do not wish to answer Question 2:

3. **RELIGION** – Please tick one box only.

Buddhist		Muslim	
Christian		No Religion	
Hindu		Sikh	
Jewish		Any other religion (please state).....	

I do not wish to answer Question 3:

4. **REFUGEE / ASYLUM SEEKER:** Please tick if this category is appropriate to you.

This information is confidential but is used by the Local Education Authority to calculate funds for the school budget.

PLEASE RETURN THIS FORM – EVEN IF YOU DO NOT WISH TO COMPLETE IT.