

'Learn with US' Access Programme Participant Form 2021/22

1. Personal Details (please use block capitals)

Name of School: _____

Forename: _____

Surname: _____

DOB: ____/____/____

Gender: Male / Female / Other / Prefer Not to Say (Please circle)

Year Group: _____

Parent / Carer Email Address: _____

Address: _____

Postcode: _____

Eligible for Free School Meals?: Yes No

In Local Authority Care?: Yes No

2. Disability Information

- No known disability
- Two or more impairments and/or disabling medical conditions
- A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D
- A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder
- A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- A mental health condition, such as depression, schizophrenia or anxiety disorder
- A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches
- Deaf or a serious hearing impairment
- Blind or a serious visual impairment uncorrected by glasses
- A disability, impairment or medical condition that is not listed above

3. Ethnicity (please tick one box)

- | | |
|---|---|
| <input type="checkbox"/> White - British | <input type="checkbox"/> White - Irish |
| <input type="checkbox"/> White - Scottish | <input type="checkbox"/> Irish Traveller |
| <input type="checkbox"/> Gypsy or Traveller | <input type="checkbox"/> Other White background |
| <input type="checkbox"/> Black or Black British - Caribbean | <input type="checkbox"/> Black or Black British - African |
| <input type="checkbox"/> Other Black background | <input type="checkbox"/> Asian or Asian British - Indian |
| <input type="checkbox"/> Asian or Asian British - Pakistani | <input type="checkbox"/> Asian or Asian British - Bangladeshi |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Other Asian background |
| <input type="checkbox"/> Mixed - White and Black Caribbean | <input type="checkbox"/> Mixed - White and Black African |
| <input type="checkbox"/> Mixed - White and Asian | <input type="checkbox"/> Other Mixed background |
| <input type="checkbox"/> Arab | <input type="checkbox"/> Other Ethnic background |

By ticking this box, I give my permission for you to take photos of my child and to use the image, portrait or picture, appearance, likeness & form

4. How we use your personal information

In compliance with data protection law, your child's personal data will only be processed by the University, or shared by it with legitimate third parties, where we have either obtained your consent or we have another lawful justification to do so respecting your privacy rights. The University keeps your personal data collected as part of providing outreach activities in a secure database and stores it in accordance with our Data Retention Schedule, as described in the University's Data Protection policy available at: www.southampton.ac.uk/legalservices/what-we-do/data-protection-and-foi.page. For more information on how the University uses your personal data to provide outreach activities, please read our Privacy Notice provided with this consent form.

In certain circumstances we would like to collect certain types of "special category" (more sensitive data regarding your ethnicity and disability status. We use this information where it is absolutely necessary to deliver our outreach activities, and for no other reasons unless required to do so by law, and we would like your consent in order for us to process this data.

I agree for the University of Southampton to process data on my child's ethnicity and disability status in line with the terms set out in the Privacy Notice: **Yes/No**

We would like to send you /your child information on other University activities and events that may interest you/your child, including taster days, residential activities and open days. To receive these updates by email, text or post, just let us know:

Yes - let's keep talking, I want to know more by email [], and/or post []

No - I don't want to hear from you about this right now []

More details about how we will process your information to communicate with you is held here:
www.southampton.ac.uk/schools-colleges/privacynotice.page

If at any stage you want to withdraw your consent, or you wish to change how we let you know what we are doing, contact us at: outreach@soton.ac.uk

– I consent to my child taking part in the University of Southampton Outreach Programme

– In the event of illness or accident, I consent to any emergency or first aid medical treatment, which might include the use of anaesthetics.

Signature of Parent / Carer: _____

Print Name: _____

Date: _____