

**PRE-REGISTRATION FORM**  
**SALTO-school De St@rtbaan**

**Data child**

Surname ..... Gender  Male /  Female / .....  
 Given name ..... Nationality (1<sup>e</sup>) .....  
 Christian name(s)..... Nationality (2<sup>e</sup>) .....  
 Date of birth ..... Date of entry into the Netherlands .....  
 City / Country of birth ..... BSN number .....

**Address**

Street ..... Zip code .....  
 House number..... Addition..... Residence.....  
 Country ..... Is the address secret.....  yes /  no  
 Home phone ..... Is the phone number secret.....  yes /  no

<b>Pre-school or day-care</b>	<b>(if applicable)</b>	<b>Elementary school of origin</b>
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Name of pre-school. .... Address ..... How many days a week ... .. VVE-indication ..... <input type="checkbox"/> yes / <input type="checkbox"/> no Name of day-care ..... Address ..... How many days a week .....	Name school ..... Residence..... Signed up there since ..... Last group/class ..... Ever repeated a class? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no If yes, which group/class? .....
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**Sign up data**

Is the child signed up for another school? .....  yes /  no  
 If yes, which school(s).....  
 Which school has your preference? .....  
 (OPTIONAL) What would be the most desirable first day in school? .....

**MEDICAL DATA OF YOUR CHILD**

<b>Medical data</b>	<b>Medication use / Allergies</b>
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Name family doctor ..... Phone number family doctor ..... For what is your child allergic .....	Medication use ..... <input type="checkbox"/> yes / <input type="checkbox"/> no If yes, which medication ..... ..... <input type="checkbox"/> inapplicable
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**ADDITIONAL INFORMATION**

Has your child had any psychic or mental examinations? .....  yes /  no  
 If yes, which agency?.....  
 Date of examination? .....  
 Do you expect that your child will need any extra support at school? .....  yes /  no  
 If yes, why? .....

## DATA CAREGIVERS

Data caregiver 1	Data caregiver 2
Surname .....	Surname .....
Given name .....	Given name .....
Initials .....Date of birth.....	Initials .....Date of birth.....
Salutation <input type="checkbox"/> Sir <input type="checkbox"/> Madam <input type="checkbox"/>	Salutation <input type="checkbox"/> Sir <input type="checkbox"/> Madam <input type="checkbox"/>
Country of birth .....	Country of birth .....
Nationality .....	Nationality .....
Do you have a refugee status..... <input type="checkbox"/> yes / <input type="checkbox"/> no	Do you have a refugee status..... <input type="checkbox"/> yes / <input type="checkbox"/> no
Mobile phone ..... Secret <input type="checkbox"/> yes / <input type="checkbox"/> no	Mobile phone ..... Secret <input type="checkbox"/> yes / <input type="checkbox"/> no
Phone work .....	Phone work .....
E-mail address .....	E-mail address .....
Receive Email? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no	Receive Email? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no
Relation to child .....	Relation to child .....
Parental authority* ..... <input type="checkbox"/> yes / <input type="checkbox"/> no	Parental authority* ..... <input type="checkbox"/> yes / <input type="checkbox"/> no
Marital state .....	Marital state .....
Does the child live with you? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no	Does the child live with you? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no
Occupation .....	Occupation .....

Address data caregiver 1 (if different from student)	Address data caregiver 2 (if different from student)
Street .....	Street .....
House number.....addition.....	House number.....addition.....
Zip code .....	Zip code .....
Residence .....	Residence .....
Country .....	Country .....
Is the address secret? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no	Is the address secret? ..... <input type="checkbox"/> yes / <input type="checkbox"/> no

## EMERGENCY NUMBERS

Call order	Relation to child	Name	Emergency number
1e			
2e			
3e			
4e			

## FAMILY DATA

Amount of children	
Place of child in family	
Any of your children already in this school?	
If yes, please fill in name(s) and date of birth	
Language most spoken at home	

\* In case the parental authority/custody is determined by court, please add a copy of the court information regarding the custody

**Do you have any other comments, details or relevant information that you want to share?**

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## USE OF PERSONAL DATA

### Processing personal data

The school is legally obliged to provide your child's personal data digitally to:

1. Education implementation Service (DUO)
2. A follow-up school via Switch Service Education (OSO)

With regard to point 2, carers must have access to these data before sending the data via OSO to the continuation school.

In the overview below you indicate whether you give permission for the use, retrieval or passing on of various personal details of your child. From a number of cases we automatically assume that you give permission for this, namely:

- the transfer of data from the previous school, nursery, day-care centre or other agencies
- the transfer of data to make use of digital teaching materials;
- the use of medical assistance in the event of accidents;
- participating in school activities organized outside of school.

If you wish to change your preference or the school to use your child's personal data, you can make this known in writing to the director of the school. Without changes, the permission below applies to the entire school career.

More information about the way in which the school deals with personal data can be found in the Privacy Regulation Student Data (<https://www.salto-eindhoven.nl/nl/ouders/regelingen>)

### Do you grant permission for:

	Permission	NO Permission
<b>1. The use of pictures and videos of your child:</b>		
• in the school guide	<input type="checkbox"/>	<input type="checkbox"/>
• on the school website	<input type="checkbox"/>	<input type="checkbox"/>
• in the parent App ( <b>photos, videos can't be downloaded</b> )	<input type="checkbox"/>	<input type="checkbox"/>
• on social media accounts of the school	<input type="checkbox"/>	<input type="checkbox"/>
• for intern use at school, such as improving the expertise of teachers	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Making a class photo by the teacher, photo is distributed to parents by the end of the schoolyear</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Exchanging name, group and date of birth with Library Eindhoven for making school library passes</b>	<input type="checkbox"/>	<input type="checkbox"/>

## SIGNATURE CAREGIVER

Caregiver 1	
Name	
Signature	
Date	

Caregiver 2	
Name	
Signature	
Date	