



# Student Information Sheet

## Pathways to Law

To be completed by a parent / carer

### Student Details:

First Name (as it appears in his/her passport)

.....

Surname (as it appears in his/her passport)

.....

Known as (please print)

.....

Address

.....

D.O.B

.....

Age

.....

Mobile Telephone #

.....

Gender: Male/Female

.....

NHS Number (if known)

.....

### Parent/Carer Details:

Name (please print)

.....

Address (if different from above):

.....

.....

Home Telephone #

.....

Mobile Telephone #

.....

Work Telephone #

.....

### Emergency Contact Details:

Please provide us with details of two people we can contact in case of an emergency. They can be the same as parent/carers.

#### Name of first Contact:

.....

Relationship to student:

.....

Contact Phone #1

.....

Contact Phone # 2

.....

#### Name of second Contact:

.....

Relationship to student:

.....

Contact Phone #1

.....

Contact Phone #2

.....

In the event of an emergency we will phone these numbers in the order given. The LSE telephone system withholds its number when dialling out. **As a result, if your telephone has call barring we will not be able to contact you in an emergency.** Please ensure the telephone numbers provided accept withheld numbers.

### Medical Details:

#### GP Information

GP's Name (please print)

.....

Address

.....

.....

.....

Telephone #

.....

Please turn over

**Emergency Treatment**

In the event of an emergency I give consent for medical treatment that my child may need to be given by medical professionals

**YES** **NO**

**Disabilities**

Does your son/daughter have a disability, either seen or unseen?

**YES** **NO**

If yes, please use an additional sheet to give us more details, including if we need to make any special arrangements.

**Allergies**

Is your son/daughter allergic to penicillin?

**YES** **NO**

Does your son/daughter suffer from any other allergies?

(e.g. allergies to specific foods, drinks, or any other medication)

**YES** **NO**

If yes, please use an additional sheet to tell us if we need to make any arrangements.

**Medication**

Does your son/daughter currently take any medication?

**YES** **NO**

If yes, please use an additional sheet to give details.

**Dietary and other requirements**

**YES** **NO**

Does your son/daughter have any special dietary/religious or cultural requirements?

If yes, please use an additional sheet to give details.

Please use an additional sheet to give details of any other information we should be aware of.

**Publicity disclaimer**

Sessions during the programme may be recorded and photographed solely for record and future publicity purposes by LSE and its agents. By your child accepting a place on Pathways to Law you (parent/carer of an applicant) are agreeing for their image to appear in LSE printed publicity and promotional material and on the LSE website. Quotes may also be taken from information supplied via the evaluation form for marketing purposes. Individuals will not be identified by name in LSE printed publicity and promotional material and on the LSE website.

**Parental Consent: Please confirm that you have read and agree to the following by signing below.**

By signing this form I agree that I am familiar with the nature of the above event organised by the Widening Participation Team (LSE) and consent to the above named young person taking part.

I understand that the Widening Participation Team (LSE) are responsible for the welfare of my son/daughter whilst they are on the LSE campus for a Pathways to Law organised event.

By taking part in this programme I understand my child's data will be used by LSE as described in the LSE Privacy Notice, which you can find at [www.lse.ac.uk/wideningparticipation](http://www.lse.ac.uk/wideningparticipation) or by requesting from [widening.participation@lse.ac.uk](mailto:widening.participation@lse.ac.uk).

I give consent for my child to be recorded and photographed for publicity purposes as detailed above. I have completed this form to the best of my knowledge.

**Name of Parent/Carer:** (please print)

**Name of Parent/Carer:** (please sign)