** DATABASE FOR CHILDREN WITH DISABILITIES AND THEIR FAMILIES Record of Entry**

The purpose of the database is to...

• To provide an information service to families (Disabled Act 1986);

• To enable children and families to highlight issues of concern;

• To promote active consultation with children and carers over service developments;

• To indicate trends in patterns of need for planning purposes;

• To facilitate a co-ordinated, joined up service response to need;

• To comply with the statutory requirements to maintain a register of disabled children within the County based on voluntary submissions.

1. **Childs Details- Record Number**

Surname First Names

Ethnic Origin See Code on Reverse

Date of Birth Gender

Residential Address

**Postcode**

1. **Nursery/School/College attended**

Full Name of Nursery/School/College

Address

**Postcode**

1. **Main Parent / Carer details**

Title Mr/Mrs/Miss/Ms

Surname First Names

Address – if different to child

Postcode

Relationship to child

Mother Grandparent Sibling Father Other

Do you have Access to the internet? Yes No

Daytime telephone no (Including code)

Mobile No Email

1. **Additional Parent / Carer detail**

Mr

Title Mr/Mrs/Miss/Ms

Surname First Names

Address – if different to child

Postcode

Relationship to child

Mother Grandparent Sibling Father Other

Do you have Access to the internet? Yes No

Daytime telephone no (Including code)

Mobile No Email

1. **Nature Of Child’s Disability**

**Please indicate the main two disabilities/ difficulties by putting number 1 next to the main disability / difficulty and number 2 if there is a secondary disability / difficulty.**

**If your child has a communication difficulty what is your child's main form of Communication – e.g. speech, Makaton, BSL, eye pointing, noises, communication aid, gestures age appropriate.**

Has your child got a diagnosis? Yes No

If yes, what?

**CONFIDENTIALITY**

**Thank you for completing this form. Your information will contribute to statistical reports that assist in the planning and provision of services in Lancashire. These reports will be compiled in such a way that identification of a particular individual is impossible. We will not disclose an individual’s information to anyone else.**

**Entry on the Database is entirely voluntary. Being registered will not affect whether your child is eligible for statutory services, nor does it guarantee that services will be provided. You can have your details removed at any time by writing to the address below.**

**Once on the Database you will be contacted from time to time to make sure your details are up to date and to let you know of any events, surveys, questionnaires or service developments. We will also send you copies of our regular newsletters.**

**Please sign to indicate your agreement to hold and process the information on this form as part of Lancashire’s Children with disabilities and their Families Database.**

Signature of Child

Signature of parent

or Main Carer

Date

How did you first hear of the Children with Disabilities and their Families Database?

Ethnic origin codes

01 White British (English, Scottish & Welsh)

02 White Irish

03 Other White background

04 Mixed White & Black Caribbean

05 Mixed White & Black African

06 Mixed White & Asian

07 Any other mixed background

08 Indian or British Indian

09 Pakistani or British Pakistani

10 Bangladeshi or British Bangladeshi

11 Any other Asian background

12 Black or Black British Caribbean

13 Black or Black British African

14 Any other Black background

15 Chinese

16 Any other ethnic group

Return Address

Room CH1:58, County Hall, Preston,

Lancashire, PR1 0LD

Or email to [FIND@lancashire.gov.uk](mailto:FIND@lancashire.gov.uk)

If a professional has assisted the child and family to complete the form please state.

Name

Tel

Designation

For help completing this form please contact your local education or social care professional