

Widening Participation & Outreach Student Information Form

Thanks for completing this form. If you have any questions please ask a St Mary's staff member or contact us via the details on page 2 - **please complete both sides**

First name:					
Last name:					
Postcode:	(e.g. TW1 4SX)				
Date of Birth:	/ / (e.g. 15 / 01 / 19	990)			
Your School or College:					
Your Gender:	Male Female Other	Prefer not t	o say		
Would you be the first pers	son in your immediate family to go to university?	Yes	No 🗌		
Have you been eligible for Free School Meals within the past six years?			No 🗌		
Have you spent any time in Local Authority Care?			No 🗌		
Do you look after someone? (Do you look after a family member who has a disability, long term illness, mental health problem or is affected by substance misuse?)			No 🗌		
Are you an Estranged student? (Do you have no communication with your parents or adoptive parents?)			No 🗌		
Do either of your parents serve in the Military (armed forces or reserves)?			No 🗌		
Are you from a Gypsy, Roma or Traveller family?			No 🗌		
Disability - please tick	the box that applies to you				
□ No known disability					
□ Two or more impairme	nts 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, or epilepsy					
□ A mental health condition, such as depression, schizophrenia or anxiety disorder					
□ A physical impairment or mobility issue, such as using a wheelchair or crutches					
□ Deaf or a serious heari	ng impairment				
Blind or a serious visual impairment uncorrected by glasses					
A disability, impairment or medical condition that is not listed above					

Ethnicity - please tick the box that applies to you				
□ White-British	Other Asian background			
□ White-Irish	□ Chinese or Other Ethnic Background – Chinese			
Other White background	Mixed – White and Black Caribbean			



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Black or Black British – Caribbean	□ Mixed – White and Black African	
Black or Black British – African	□ Mixed – White and Asian	
Other Black background	Other Mixed background	
Asian or Asian British – Indian	Other Ethnic background	
Asian or Asian British – Pakistani	□ Not Known	
Asian or Asian British – Bangladeshi	□ Information refused	

Your data – Evaluation

The above personal data you have provided will be used **to manage and deliver** our programmes, and to **monitor, evaluate and research** the impact activities on participants. Your data will help to evaluate the effectiveness of our activity as part of the government policy to widen participation in higher education, and to develop future policy. Your data may be shared with government funding bodies and our collaborative partners. Please see our **full Privacy Notice** for details of our partners and data sharing: <u>www.stmarys.ac.uk/outreach/targeting</u>

Your data – Tracking outcomes/ Photo permissions

To enable long-term monitoring, evaluation and research on outcomes for the people who participate in our outreach programmes, we also **track** student data and link it with data held in national datasets. We can then analyse and report on the attainment and education destinations of the people who have taken part in our activities. However, data will be **anonymised** in reporting and evaluation – no-one will be individually identifiable in these aggregated reports.

St Mary's University Twickenham, and The Saturday Club Trust and programme partners, may wish to use **photography or film footage** of young people and their creative work to promote our institutions and the Saturday Clubs. This applies to print and digital media formats including print publications, websites, e-marketing, posters, advertising, film and social media.#

I consent to data tracking for evaluation & monitoring	Yes 🗆	No 🗆
I consent to the use of my child's image/ creative work from photography and filming	Yes 🗌	No 🗆

Printed Parent/Guardian's Name: _____

Parent/Guardian's Signature:

Date: _____

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