|  |  |
| --- | --- |
| Manchester Family HubEmpowering Parents Empowering Communities (EPEC)Being a Parent (aged 1 to 3) Course Interest Form | A blue and black logo  Description automatically generated |

|  |  |  |
| --- | --- | --- |
| Parent/carer Full Name | Parent/carers Date of Birth |  Relationship to child |
|  |  |  |
| Address | Telephone Number(s) |
|  Post Code: |  |
| Email Address | Languages spoken |
|  |  |
| Parent Ethnicity |
|  | White British  |  | Asian or Asian British: Indian |  | Mixed White and Black Caribbean |
|  | White Irish |  | Asian or Asian British: Pakistani |  | Mixed White and Black African |
|  | Other White |  | Asian or Asian British: Other |  | Mixed White and Asian |
|  | Black or Black British: Caribbean |  | Asian or Asian British: Bangladeshi |  | Other mixed origin |
|  | Black or Black British: African |  | Chinese  |  | Other ethnic group – please state |
|  | Black or Black British: Other |  |  |  |  |
| Child’s Name | Male (M) Female (F) or Non-binary (NB) | Child’s Date of Birth  | Child Ethnicity (Please select from above) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| Please note anything you would like the trainers to be aware of to help you get the most from the course e.g. disabilities, translator requirements, dyslexia/literacy needs, physical needs |
| Creche required? YES  NO We recommend you use alternative childcare options where available so you can have the space to concentrate on you! |

Parent Signature………………………………………………………………………….Date………………………

(If parent is completing)

|  |
| --- |
| Referrer Details (if request is being made on parents behalf) |
| Name | Agency |
| Referrer Signature | I have parents’ permission to provide the above information [ ]  |
| Telephone Number | Date |