# Future You Registration Form - 2024/2025

If you have any questions about the Future You programme, or if you need assistance filling in the application form, please contact us by emailing **neaco@admin.cam.ac.uk**

**Protecting your personal data is incredibly important to us.**

By submitting this form, you will be sharing your personal data. For information on how we will use your data, who it may be shared with, your rights and who to contact if you have any questions or concerns please visit **takeyourplace.ac.uk/data-protection-information-for-students/** Future you is part of neaco's Take Your Place programme, we will use and store your data in order to get in touch with you by email to facilitate your involvement in the Future You programme and events related to this programme. If you would prefer we didn't contact you in this way, please contact us on the email address below.

Please contact neaco@admin.cam.ac.uk if you have any questions about how neaco use your data.

## Section 1: Young person

**First name**_____ **Last name**_____

**Current postcode**_____ **Date of Birth (dd/mm/yyyy)**_____

**Email address**_____

**Gender** ☐ Male ☐ Female ☐ Other gender identity ☐ Prefer not to say

**What school year are you currently in?** ☐ Year 9 ☐ Year 10 ☐ Year 11

☐ Other (please give details) _____

**What is the name of the school you attend?**_____

**Please select any of the below which apply to you:**

☐ I am currently under local authority care

☐ I have previous experience of being in local authority care

☐ I am seeking asylum in the UK

☐ None of the above

**What is the name of your local authority?**

☐ Cambridgeshire County Council ☐ Norfolk County Council ☐ Suffolk County Council

☐ Peterborough City Council ☐ Other_____

**I would like to sign up to the Future You programme for 2024/2025**

☐ Yes please ☐ No thank you

**I am happy to be sent information about future events for the Future You programme**

☐ Yes ☐ No

## Section 2: Your Guardian

We will need permission from an adult guardian for you to attend Future You events and activities. Please provide details below so we can contact them.

We presume you will have checked that your guardian is happy to be named on this form and contacted by us.

Please tell us your **guardian**'s name:

**First name**_____ **Last name**_____

**Please describe this person's relationship to you** (e.g. social worker, foster carer, key residential practitioner)

_____

**Their email address**_____

**Their phone number**_____

Please provide your **social worker**'s details. If you have already given them in the previous section please write "as above".

**First name**_____ **Last name**_____

**Their email address**_____

**Their phone number**_____

We may need to contact your **designated teacher** to arrange events/trips that happen during school hours. Please enter their contact details below.

**First name**_____ **Last name**_____

**Their email address**_____

**Their phone number**_____

Thank you for completing this form. Please return it to neaco@admin.cam.ac.uk or post to: neaco, University of Cambridge, Student Services Centre, New Museums Site, Bene't Street, Cambridge, CB2 3PT.

If at any time you wish to find out more about your data or wish to withdraw your consent for us to use the images, please contact us at neaco@admin.cam.ac.uk