



**SEPTEMBER 2022 INTAKE TO:-
NORTHBROOK COLLEGE COMBINED CADET FORCE
ROYAL NAVY**

	R e q u i r e d ?	Description / Example OVERWRITE IN THE BOXES BELOW ALL FIELDS REQUIRED ADJACENT TO YES
First Name	Yes	<i>Cadet's first name</i>
Initials	Yes	<i>Cadet's first and middle initials</i>
Surname	Yes	<i>Cadet's last name</i>
Date of Birth	Yes	<i>Cadet's date of birth in the format e.g. 16-Mar-2017 or 16-03-17</i>
Gender	Yes	<i>Valid values are: Male and Female, or M and F</i>
Ethnicity	Yes	<i>One of the following values must be supplied for each cadet: White British, White Irish, White Other, Mixed, Asian Indian, Asian Pakistani, Asian SELECT 'Bangladeshi, Asian Other, Black Caribbean, Black African, Black Other or Chinese</i>
NOK Name	Yes	<i>Cadet Next-of-Kin name</i>
NOK Relationship	Yes	<i>Enter the next-of-kin's relationship to the cadet. Choose from this list: Aunt, Brother, Carer, Daughter, Family Friend, Father, Foster Parent, Grandparent, Guardian, Husband, Mother, Partner, Sister, Son, Step Father, Step Mother, Uncle, Wife, Other</i>



SEPTEMBER 2022 CADET INTAKE CONTINUED

NOK Address	Yes	<i>Next-of-Kin street address</i>
NOK Postcode	Yes	<i>Next-of-Kin postcode</i>
NOK Phone	Yes	<i>Next-of-kin phone number</i>
Medical	Yes	<i>Medical Condition(s). Enter None for no medical conditions or choose one or more from this list - ADHD:Allergy:Asthma:Back:Concentration:Coordination:Dexterity:Diabetes:Dyslexia:Dyspraxia:Eczema:Epilepsy:Eyesight:Fractures:Hay Fever:Head:Hearing:Heart:Incontinence:Learning:Memory:Migrane:Mobility:Objects:Rheumatic:Risk:Speech NOTE: When multiple apply separate with a colon, e.g. Asthma: Hay Fever</i>
Dietary	Yes	<i>Dietary Requirement(s). Enter None for no dietary requirements or choose one or more from this list – Vegan:Fish / Seafood Allergy:Dairy Allergy:Gluten Free:Halal:No Beef Products:No Egg Products:No Pork Products:Kosher:Nut Allergy:Vegetarian:Wheat Allergy NOTE: When multiple apply separate with a colon, e.g. Dairy Allergy:Gluten Free</i>
Cadet House Name	No	<i>Part of cadet Contact details, e.g. Rose Cottage</i>
Cadet Street Address	Yes	<i>Part of cadet Contact details. e.g. 42 Crescent Road</i>
Cadet Town	Yes	<i>Part of cadet Contact details. e.g. Bath</i>
Cadet County	Yes	<i>Part of cadet Contact details. e.g. Somerset</i>
Cadet Postcode	Yes	<i>Part of cadet Contact details. BA2 4JP</i>
Cadet Phone Number	Yes	<i>Part of cadet Contact details</i>



SEPTEMBER 2022 CADET INTAKE CONTINUED

Cadet Mobile Number	Yes	<i>Part of cadet Contact details</i>
Cadet Email	Yes	<i>Part of cadet Contact details</i>
Academic Year	No	<i>The cadet's academic year. Must be a number in the range 7 to 13 inclusive or 8 to 14 inclusive for Northern Ireland.</i>
TOS Date	No	<i>The date that the Cadet was Taken on Strength in the format DD-MON-YYYY, DD-MON-YY or DD-MM-YY, e.g. 16-Mar-2020, 16-Mar-20 or 16-03-20</i>