

ST NICHOLAS' N.S. - ENROLMENT FORM

Please Complete ALL SECTIONS of this form & Include copy of Birth Certificate

SCHOOL YEAR - / **CLASS LEVEL:** _____

Birth Surname: _____ Birth Forename: _____

PPSN of Pupil : _____ Date of Birth: _____ Gender: Male / Female
Copy of Birth Certificate is required to accompany this form

Country of Birth: _____ Nationality of Pupil: _____

Is One of the Pupil's mother tongues (spoken at home) Irish or English: Yes or No

Address: _____
Please note: it is your responsibility to inform the school of any changes to your contact details

_____ Eircode: _____

2nd Address (If relevant to your family situation) : _____

_____ Eircode: _____

Previous School/ Pre-school _____ Class _____

Brothers/sisters or close currently in this school? _____

Health/Allergies: _____
A consent to the administration of medicines policy & form is available from school office for inhalers etc & must be completed if applicable

Family Doctor's Name: _____ Phone no. _____

Mother's Name _____ Mobile No. _____

Mother's Email: _____ @ _____

Father's Name _____ Mobile No. _____

Father's Email: _____ @ _____

Emergency Contact Names & Telephone Numbers - (other than Parents above)

1. Name: _____ Relationship: _____ Mobile: _____

2. Name: _____ Relationship: _____ Mobile: _____

I declare the information I have given to be correct and I understand that it will be held in confidence by the school.

Signature of Parents/Guardian _____ **DATE:** _____

For School Use Only

Form Received: _____ Acknowledged: _____ Aladdin: _____

Date commenced in this school: _____ P.O.D Pupil ID. _____

Class _____ Class Teacher _____

INTERNATIONAL CHILDREN PROFILE

(This information is required to ascertain need for additional English Lessons at school)

Year of Arrival of Child in Ireland: _____ Has your child attended Pre-school: YES/ NO

Has your child attended any other National school in Ireland: YES* / NO

*If Yes, Number of years in school _____

Language spoken at home? _____

Any Other Information that may be relevant :

PUPIL ONLINE DATABASE (POD)

The Department has consulted with the Data Protection Commissioner in relation to the collection of individual pupil information for the Primary Online Database. Both religion and ethnic and cultural background are considered sensitive personal data categories under Data Protection legislation. **Therefore, it is necessary for each pupil's parent/guardian to identify their child's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills.** All other information held on POD was deemed by the Data Protection Commissioner as non-sensitive personal data.

To which ethnic or cultural background group does your child belong (please tick one box)?					
(Categories are taken from the Census of Population)					
White Irish		Irish Traveller		Roma	
Any other White Background		Black or Black Irish - African		Black or Black Irish - Any other Black Background	
Asian or Asian Irish -Chinese		Asian or Asian Irish - Any other Asian Background		Other (inc. mixed background)	
No Consent <input type="checkbox"/>					

What is your child's religion?

- | | | |
|--|---|--|
| Roman Catholic <input type="checkbox"/> | Church of Ireland <input type="checkbox"/>
<i>(incl. Protestant)</i> | Presbyterian <input type="checkbox"/> |
| Methodist, Wesleyan <input type="checkbox"/> | Jewish <input type="checkbox"/> | Muslim(Islamic) <input type="checkbox"/> |
| Orthodox <input type="checkbox"/>
<i>(Greek, Coptic, Russian)</i> | Apostolic or Pentecostal <input type="checkbox"/> | Hindu <input type="checkbox"/> |
| Buddhist <input type="checkbox"/> | Jehovah's Witness <input type="checkbox"/> | Lutheran <input type="checkbox"/> |
| Atheist <input type="checkbox"/> | Baptist <input type="checkbox"/> | Agnostic <input type="checkbox"/> |
| Other Religions <input type="checkbox"/> | No Religion <input type="checkbox"/> | No Consent <input type="checkbox"/> |

I consent for this information to be stored on the Primary Online Database (POD) and transferred to the Department of Education and Skills and any other primary schools my child may transfer to during the course of their time in primary school.

Signed: _____

Date: _____

Parent/Guardian/Student

CHILD NAME: _____

St. Nicholas' N.S. Consent Form	Yes	No
I Consent to my child attending in the Learning support/ Resource teacher if deemed necessary by the school		
I Consent to my child's photograph/image being included in school based activities and publications as per the school's policy		
I acknowledge that it is a condition of enrolment in State Primary Schools that my child's details will be stored on the Primary Online Database.		
I Consent to my child's details (Name, address, Date of Birth etc) being given to the H.S.E. for their Vaccination / screening programmes		
I Consent to my Child being brought to a doctor/hospital in an emergency and to him/her receiving such treatment as the medical personnel may deem necessary (every effort will be made to contact you beforehand)		
I consent to basic first aid being performed on my child, if necessary		
I Consent to my child, in the event of a toileting accident, being assisted and changed pending his/her collection or contact being made with you		
I Consent to my child's participation in activities such as school tours, outings, sporting events etc.		
I Consent to the transfer of information should my child move school or upon progression to Secondary school.		
Please note that as a Catholic ethos school all children participate in the RSE programme unless written permission to exclude them is provided by parents. There is no provision to accommodate children in other classes during RSE time.		
PARENT'S/GUARDIAN'S SIGNATURE: _____ DATE: _____		

ASSESSMENT DETAILS:

Please give details of assessments or reports done, if any. Please note that copies of any assessments done MUST be supplied to Claddagh NS upon enrolment.

ASSESSMENT	PROFESSIONAL / AGENCY	DATE of REPORT
Speech Therapy Assessment/Report		
Occupational Therapy Assessment /Report		
Educational Psychological Assessment /Report		
Other Assessments / Reports Please Give details		