APPLICATION FOR ENROLMENT FORM

Child Details

Surname of child:_____ First Name:_____

Address:_____

_____

Date of Birth:_____ Boy /Girl:_____ PPS No. _____

Age on Entry: _____   Religion: _____

Nationality:_____ Language spoken at home: _____

Proposed entry date:_____ Proposed Class of Entry:_____

Birth/Baptismal Certificate attached: Yes _____

Parent/Guardian Details

Mother's name:_____

Address (if different from above):_____

Home Tel No:_____ Mobile No:_____ Other_____

Preferred e-mail: _____ Occupation: _____

Father's name:_____

Address (if different from above):_____

_____

Home Tel No:_____ Mobile No:_____

Preferred E-mail:_____ Occupation: _____

Parents are invited to sign up to our text system to receive updates and reminders regarding school events, please indicate your preferred mobile number for receiving such texts _____.

Present School / Playschool Details (If applicable)

Name and address of present school/playschool:_____

_____

Telephone No. _____ Name of Head teacher: _____

Special / Mainstream (please delete as appropriate)

I give permission for the Principal of Scoil Cholmcille to discuss the needs of my child with the manager of the
Above mentioned pre-school. Yes [   ]   No [   ]

Medical:

Name and phone no. of Family Doctor. _____

Has your child ever been referred to a specialist by your doctor? Yes [   ]   No [   ]

If yes, please give brief details for referral: _____

_____

_____

Has your child any allergies? Yes [   ]   No [   ]

If yes, please give details: _____

_____

_____

Does your child appear to have difficulties with the following?

Hearing: Yes [   ]   No [   ]   **Speech:** Yes [   ]   No [   ]   **Vision:** Yes [   ]   No [   ]

If you have answered yes to any/all of the above, please give details: _____

_____

_____

Has your child ever had any type of assessment (including speech therapy)? Yes [   ]   No [   ]

If yes, please give details: _____

_____

_____

Please attach a copy of all assessments relating to your child's development and/or needs.

The school teaches Relationships and Sexuality Education (RSE) using the guidelines provided by the
Department of Education and Skills. If you would like to view the content of the programme used in the school
for teaching RSE you are welcome to do so.

If you have any concerns with regard to RSE please tick this box so that an appointment will be made with
the principal to discuss your concern. [   ]

Do you give your consent for your child to take part in RSE? Yes [   ]   No [   ]

Do you give your consent for your child to take part in the Stay Safe Programme? Yes [   ]   No [   ]

First Aid will be administered in accordance with our school policies and procedures, unless otherwise stated
in writing by the Parents/Guardians. The school day begins at 9.20 am and ends at 2.00 pm for Junior and
Senior Infants and 3.00 pm from 1st to 6th class. Children must be dropped off and collected on time.

Do you give permission for your child to go on local school trips under teacher supervision during the school day e.g. trip to the park, local historical buildings, local pitch etc., Yes ☐ No ☐

Sometimes journalists visit our school to take pictures of the children e.g. awards/prizes, sporting events, first day at school etc. Do you give permission for your child to be photographed for school projects, local newspaper, and school related activities? Yes ☐ No ☐

The Board of Management cannot be held responsible for pictures/videos taken by parents at various celebrations, school concerts, etc.

Please visit our school website www.scoilcholmcille.ie Do you give permission for your child's photo to be used on the school website? Yes ☐ No ☐

Sometimes the school is requested to pass on names of children and their addresses to the Health Board for immunisation purposes and for eye sight/hearing testing, to secondary schools when children are transferring to second level and to sporting bodies when children are taking part in games outside the school. Do you allow the school to pass on this information to the abovementioned bodies. Yes ☐ No ☐

Do you give permission for your child to take part in swimming lessons organised by the school?
Yes ☐ No ☐

Do you give permission for your child to attend in school Learning Support if deemed necessary.
Yes ☐ No ☐

I/We have completed the Pupil Information for the Department of Education & Skills Primary On-Line Database (POD)(attached). The completed form has been submitted with the Application for Enrolment.
Yes ☐ No ☐

Declaration:

We request that the above named child is considered as a prospective pupil of Scoil Cholmcille, Greencastle. We understand that the standard terms and conditions of the School will undergo reasonable changes from time to time.

The information I/we have given in this form is accurate. Yes ☐ No ☐

Mother / Guardian's signature:_____

Father / Guardian's signature:_____

Please return this form to Scoil Cholmcille, Greencastle on or before 12.00 noon on Friday 25th February 2022.

IF ANY OF THE DETAILS IN THIS FORM CHANGE – FOR EXAMPLE, IF YOU MOVE HOUSE, CHANGE YOUR PHONE NUMBERS ETC., WOULD YOU PLEASE INFORM THE SCHOOL AT YOUR EARLIEST OPPORTUNITY.

PLEASE ATTACH A COPY OF ALL ASSESSMENTS RELATING TO YOUR CHILD'S DEVELOPMENT AND/OR NEEDS.

Pupil Information for Department of Education & Skills Primary On-Line Database

The Department of Education and Skills is developing an electronic database of primary school pupils called the Primary Online Database (POD) which will involve schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database will allow the Department to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting.

The database will hold data on all primary school pupils including their PPSN, First Name, Surname, Name as per Birth Certificate, Mother's Maiden Name, Address, Date of Birth, Gender, Nationality, whether one of the pupil's mother tongues is English or Irish, whether the pupil is in receipt of an Exemption from Irish and if so the reason for same, whether the pupil is in receipt of Learning Support and if so the type of learning support, whether the pupil is in a Mainstream or Special Class. The database will record the class grouping and standard the pupil is enrolled in. The database will also contain, on an optional basis, information on the pupil's religion and on their ethnic or cultural background. **In order to assist with the gathering of data please complete this form in CAPITAL LETTER.**

Teacher/Class Name _____   **Current Standard**

Junior Infants ☐   Senior Infants ☐   First Class ☐

Second Class ☐   Third Class ☐   Fourth Class ☐

Fifth Class ☐   Sixth Class ☐   Special Class ☐

Pupil Forename: _____   **Pupil Surname:** _____

PPSN of Pupil_____   **OR Mother's Birth Surname**_____

Pupil's Date of Birth _____   **Pupil's Gender: Male** ☐   **Female** ☐

Birth Cert Forename (if different from name above)   **Birth Cert Surname** (if different from name above)

_____ _____   _____

Pupil Address   _____ _____

_____ _____

_____ _____ _____

County   _____ _____

Nationality   _____   **(In the case of dual citizenship, please specify both nationalities)**

Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English?

Yes ☐   **No** ☐

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 sensitive personal data categories under Data Protection legislation. These questions are optional. While these questions are optional, the information would be very useful to the Department for statistical and research purposes. Aggregated information on Ethnic/Cultural background will be used to track the progress of these groups, and to compare their progress with other groups, thereby identifying gaps in the system and assisting in the development and implementation of appropriate policies and interventions. Enhanced capitation in respect of pupils who are members of the Traveller Community will be paid to schools on the basis of the answers to this question. Aggregated information on religion will be used for statistical purposes only. Parents/guardians are asked, if they wish to do so, to identify their children's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills. This page of the form will be retained by your primary school.

To which ethnic or cultural background group does your child belong (please tick one)?
(Categories based on 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 ☐

What is your child's religion?

Roman Catholic ☐   Church of Ireland ☐   Presbyterian ☐
                          (Anglican) ☐

Methodist, Wesleyan ☐   Jewish ☐   Muslim (Islamic) ☐

Orthodox ☐   Apostolic or Pentecostal ☐   Hindu ☐
(Greek, Coptic, Russian)

Buddhist ☐   Jehovah's Witness ☐   Lutheran ☐

Atheist ☐   Baptist ☐   Agnostic ☐

Christian Religion ☐   Protestant ☐   Evangelical ☐
(not further defined)

Other Religions ☐   No Religion ☐   No Consent ☐

I consent for the sensitive personal data in the two questions above 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: _____

Parent/Guardian

Date: _____

Please complete this form and return to your primary school. For further information on POD please go to the Department of Education and Skills' website www.education.ie