Scoil Bhríde, Ráth Chormaic (025) 36616

**APPLICATION FOR ADMISSION OF NEW PUPILS 2022/2023**

**Child’s Details**

|  |  |
| --- | --- |
| **Forename: (as per birth cert)** | **Date of Birth:** |
| **Surname: (as per birth cert)** | **Gender:** |
| **Home Address:**  **Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Nationality: (in the case of dual citizenship please specify both nationalities)** |
| **With whom does the child reside? *(Please tick)*****Father and Mother 🞎 Father 🞎** **Mother 🞎 Other 🞎** | **P.P.S.N. Number:** |
| **Is one of the pupil’s mother tongues (i.e. language spoken at home) Irish or English? Yes 🞎 No 🞎** | **Religion:** |

**Family Details**

|  |  |
| --- | --- |
| **Parent’s Name:** | **Parent’s Name:**  |
| **Mobile Number:** | **Mobile Number:** |
| **E-mail address:** | **E-mail address:** |
| **Work Number:** | **Work Number:** |
| **Address:(If different from child’s)** | **Address:(If different from child’s)** |
|  |  |
| **Number of children in family:****This child’s place in the family:** | **Mother’s maiden name:** |
| **Does any legal order under family law exist that the school should know about?** **Yes 🞎 No 🞎****(If “Yes” please inform the Principal)** |

**Text correspondence is normally sent to mother's number unless otherwise advised.**

**Medical Details**

|  |
| --- |
| **Name of child’s doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Does your child have any medical condition, allergies or other health issues that the school should know about?**

**Yes 🞎 No 🞎**

**If “Yes” please give details:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is your child receiving support from other professional/s or agencies e.g., speech and language, psychology, physiotherapy, other?** *Please give details and attach a copy of report/s*.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Education Details**

|  |
| --- |
| **Name of pre-school attended: (if any) From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_** |
| **Name and address of previous primary school (if applicable): Class in that school: \_\_\_\_\_\_\_\_\_\_\_****(Please attach progress reports)** |
| **Details of any additional learning support received:** |

**Childminder’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact Details**

*Please give name and contact details for two people who can be contacted in the case of an emergency if parents cannot be contacted.*

|  |  |  |
| --- | --- | --- |
| **1.** | **Name:**  | **Phone:** |
| **2.** | **Name:** | **Phone:** |

Should any of these numbers change while your child is attending this school, please inform the secretary immediately.

**Do we have your permission to bring your child to the Doctor/Hospital/Dentist should an accident occur, and we are unable to contact parents or nominated emergency contacts? Yes 🞎 No 🞎**

**Additional Information**

#### Child Protection and Welfare

The Board of Management of Scoil Bhríde has adopted the Department of Education and Skills “Guidelines and Procedures in relation to Child Protection and Welfare”. Consequently, if school staff suspect or are alerted to possible abuse, they are obliged to refer this matter to the Health Service Executive (HSE). The HSE will then assess the situation and provide support for the child/children concerned. The Child Protection Guidelines can be read on the Department’s website **(**[**www.education.ie**](http://www.education.ie)**)** A copy of the guidelines is also available for viewing at the school.

#### Attendance

Under the terms of the National Education Welfare Act 2000 the Principal is obliged to inform the Education Welfare Board when a pupil’s absence record reaches 20 days (for any reason).

#### Parental Partnership

As partners in education, parents are expected and encouraged to be actively involved in the learning process and in school activities. Parental help, support and co-operation will be required for many activities e.g., attendance at information meetings and assisting with extra-curricular activities and other special events.

**Parental Consent Form**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| I/We give permission for my child to participate in sports events, outings, field trips and other activities and I/we understand that my child may have to travel outside of school grounds for some of these activities/ events. |  |  |
| I/We give permission for the teaching staff and school authorities to administer necessary tests. (screening, standardized). |  |  |
| I/We have read the School Code of Behaviour and I/we accept the Code of Behaviour and school rules of Scoil Bhride, Rathcormac. |  |  |
| I/We certify that the information given in this form is correct. |  |  |

**To be signed by parent/s / guardian/s**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Thank you for providing the information requested in this “Application for Enrolment”. The information supplied will assist us in supporting your child when he/she is enrolled as a pupil in Scoil Bhríde. The information will be treated as private and confidential and will be released to staff members on a need-to-know basis only. Please read Data Privacy Statement on our website.***

***On the next page you will find information regarding the Department of Education and Skills Primary Online Database. Please complete this form. Further details about this database can be found on the Department’s website*** [***www.education.ie***](http://www.education.ie)

**Pupil Information Required for Department of Education and Skills Primary Online Database**

The Department of Education and Skills has developed an electronic database of primary school pupils called the Primary Online Database (POD) which involves schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database allows 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 holds 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 also contains, on an optional basis, information on the pupil's religion and on their ethnic or cultural background.

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 box beside appropriate.**

**(Categories are taken from the Census of Population)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **White Irish** |  | **Irish Traveller** |  | **Roma** |  | **Any other Black Background** |  |
| **Black African** |  | **Other incl. mixed Background** |  | **Chinese** |  | **Any other Asian Background** |  |
| **No Consent** |  |  |  |  |  | **Any other White Background** |  |

**What is your child’s religion?**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Roman Catholic** |  | **Church of Ireland (Anglican)** |  | **Presbyterian** |  | **Methodist, Wesleyan** |  |
| **Muslim (Islamic)** |  | **Jewish** |  | **Hindu** |  | **Orthodox (Greek, Coptic, Russian)** |  |
| **Apostolic or Pentecostal** |  | **Buddhist** |  | **Jehovah's Witness** |  | **Lutheran** |  |
| **Atheist** |  | **Baptist** |  | **Agnostic** |  | **Other Religions** |  |
| **No Religion** |  | **Christian (not further defined)** |  | **Evangelical** |  | **No Consent**  |  |

***I consent/ do not consent (circle as appropriate) 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian**

**Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**