

A thuismitheoirí, Please complete all sections of this online form and submit your enrolment application. The school will be in touch in due course regarding your application. Please include contact details for someone other than parents/guardians in the emergency contacts section and enter any other relevant information in the Note Box. Please contact the school directly at stjosephs@rathwirens.ie if you have any other questions.

Child

First name:

Last name:

Gender:

PPS Number:

Date of birth:

Previous school:

Note:

Doctor number:

Are there any orders or other arrangements in place governing access to or custody of your child? If yes, please arrange meeting with the principal to discuss details. Bring any relevant documentation to meeting:

Any medical concern/information of relevance? Please provide school with details:

Has your child any Special Educational Needs? Please forward copies of any professional assessments to school:

If yes, please state diagnosed condition:

Are you applying for a place in a mainstream or ASD class?:

Is your child transferring from another school:

If your child is transferring from another school, please name current class:

Did your child attend pre-school/playschool?:

If yes, please state name of pre-school/ playschool:

Has a sibling already in school:

If yes, please state sibling's name:

I give permission for my child to receive any medical attention deemed necessary and to be taken to hospital in case of serious illness or accident:

☐

I have read a copy of St. Joseph's N.S. Code of Discipline on the school website and agree that my child and I will abide by it:

☐

I agree to familiarise myself with all school policies on the school website, in particular but not exclusively, attendance, enrolment, anti-bullying, complaints procedure, agree to abide by them and agree to discuss them at an appropriate level to my child:

☐

I give consent to allow my child to enter school competitions and for their name and date of birth to be shared with the organisers:

☐ *

I have read the school's GDPR/Privacy statement on the school's website:

☐ *

The school may share Personal Pupil Data with other organisations such as HSE, Tusla, An Garda Siochana, etc where there is legal basis for doing so under GDPR:

☐ *

I give consent for my child to use the computers in the school in line with the Acceptable Use Policy:

☐ *

I give consent to share Ethnic or Cultural Background and Religion with the Department of Education & Skills:

☐ *

During the school year classes may undertake activities outside the school premises. e.g. Visiting the Church, Library, School Tours:

☐ *

After reading the POD explanation on our school website under downloads, I consent for POD specific information to be stored on the Primary Online Database (POD) and transferred to the Department of Education & Skills and other primary schools my child may transfer to during the course of their time in primary school:

☐ *

To which ethnic or cultural background group does your child belong (please state one in the box below) White Irish/Irish Traveller/Roma/Any other white background/Black African/Any other Black background/Chinese/Any other Asian background/Other (inc. mixed background):

What is your child's Religion? Please state one of the following Roman Catholic/Church of Ireland/Protestant/Presbyterian/Methodist/Jewish/Muslim/Orthodox/Apostolic or Pentecostal/Hindu/Buddhist/Jehovah's Witness/Lutheran/Atheist/Baptist/Agnostic/Other Religions/No Religion:

A copy of your child's Birth Certificate is required with all enrolments, following the offer of a place in St. Joseph's N.S:

☐ *

If your child was Baptised outside the Parish of Killucan and you intend for them to make their 1st Holy Communion/ Confirmation, a copy of your child's Baptismal Certificate is required following the offer of a place in St. Joseph's N.S:

☐

I give consent for the use of school related photographic images which may include my son/daughter on the school website. I understand that s/he will not be identified individually:

☐ *

I give consent for the videoing of my child during lessons for educational purposes:

☐ *

I consent to the use of school related photographic images which include my son/daughter in local newspapers:

☐ *

I give permission for the use of school related photographic images which include my son/daughter for display in the school building:

☐ *

I acknowledge that consent is given to securely store my child's personal data, provided above, in the school's central files and to be inputted into the school's Management Information System:

Aladdin:

☐ *

By submitting this form, I acknowledge that both of the child's legal guardians are aware of and consent to this Pre-Enrolment form being submitted:

☐ *

You are pre-enrolling for: 2024 Infant Intake

Family

Home phone number:

Alt home phone number:

Address (with Eircode):

Alternate address:

Alternate address description:

Guardian 1

First name:

Last name:

Email:

Mobile number:

Work number:

Guardian 2

First name:

Last name:

Email:

Mobile number:

Work number:

Emergency Contacts

1 Name:

Description:

Mobile number:

Home number:

Work number:

2 Name:

Description:

Mobile number:

Home number:

Work number: