

**Application for Admission of New Pupils**

School year	<input type="text"/>	Date of admission	<input type="text"/>
Christian name of child	<input type="text"/>	Surname	<input type="text"/>
Date of birth	<input type="text"/>	PPS NO:	<input type="text"/>

Father's name & Occupation	<input type="text"/>		
Mother's name & Occupation	<input type="text"/>		
E Mail address	<input type="text"/>		
Home address	<input type="text"/>		Eircode: <input type="text"/>
Home Phone	<input type="text"/>	Father (mobile)	<input type="text"/>
Mobile Phone (mother)	<input type="text"/>		<input type="text"/>
If a parent cannot be contacted who should the school contact:	<input type="text"/>		

Religious denomination	<input type="text"/>
Date & place of baptism	<input type="text"/>
Class into which child is to be enrolled	<input type="text"/>

Previous School Attended	<input type="text"/>
School Address	<input type="text"/>
School Phone	<input type="text"/>
School Principal	<input type="text"/>
Previous Class	<input type="text"/>
Previous Class teacher	<input type="text"/>

If your child is entering Junior Infants, Name and address of playschool/nursery	<input type="text"/>
--	----------------------

Did your child receive learning support in english	Yes <input type="text"/>	No <input type="text"/>
Did your child receive learning support in math	Yes <input type="text"/>	No <input type="text"/>
Will school transport be required (IF ELIGIBLE)	Yes <input type="text"/>	No <input type="text"/>

Name of family doctor


Has your child received all the relevant vaccinations to date?

Please ensure that your child has received from your family doctor, the relevant immunisations and booster "shots" before enrolling.

If your child requires a doctor and you cannot be contacted, the school doctor (Dr. Maria Hannigan) will be contacted

Do you give permission to take the child straight to hospital in case of serious illness or accident ?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Does your child have any medical conditions/allergies?

If you answered yes above, please describe briefly

--

Has your child been referred for any of the following?

Speech Training?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Occupational Therapy?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Psychiatric/Psychological Assessment?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Do you give permission for your child to take part in the SAFE programme?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

Do you give permission for your child to take part in the Relationships and Sexual Education programme?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

Do you give permission to have your child's photograph appear on school website or in other publications? (No child will be identified and no child will appear in groups of less than 3 children (As per Dept. of Education Guidelines)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

Do you give permission for your child's name and date of birth to be submitted when taking part in competitions? (i.e. art competitions, sports competitions, quizzes etc )

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

Does any legal order under family law exist that the school should know about?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

If you answered yes above, please describe briefly

--

When a child spends time in two homes we assume that when we wish to communicate with parents regarding their child, the parent who is contacted (i.e: the parent with whom the child principally resides) will inform the other parent of meetings, arrangements etc.

The school should be made aware of any court order which affects the child's welfare and also the name of any person into whose custody the child should not be given.

Have you attached a Birth Certificate?    Yes     No

**We have read the school code of discipline and bullying policy and are in agreement with its content. We will co-operate with the staff and support the ethos of the school.**

**Parents, please sign and date below:**

Signed:   
Date:

Signed:   
Date:

**Please return the completed enrollment form to the school as soon as possible**

**St. Josephs National School Principal:**

Dominic Gallagher