

ST. SENAN'S N.S. APPLICATION FOR ENROLMENT FORM

Telephone: Office and Junior Building 051-885361

e-mail: info@stsenansns.ie



Part 1 – STUDENT & FAMILY DETAILS

Required for school enrolment and parental contact purposes and to ensure that the applicant meets the criteria of our Admissions Policy which is available at www.stsenansns.ie or by request from the school office.

Child's Full Name/s: _____

Preferred Name (if difference from above): _____

Date of Birth (attach a copy of Birth Certificate): _____

Student's PPS No.: _____

Nationality: _____

Gender: _____

Home Address: _____

Parent/Guardian 1	Parent/Guardian 2
First Name:	First Name:
Last Name:	Last Name:
Maiden Name (if mother):	Maiden Name (if mother):
Relationship to child:	Relationship to child:
Address (include Eircode):	Address (include Eircode):
Phone No: (Mobile)	Phone No: (Mobile)
Phone No: (Work)	Phone No: (Work)
Email Address:	Email Address:

Sibling in School? Yes No

Name(s) of Sibling(s): _____

Sending Information Home:

Please state if information needs to be sent to both parents/guardians at different addresses:

Yes No

Additional Emergency Contact Name:

Name: _____ Phone No: _____

Relationship to Child: _____

PART 2 – EDUCATIONAL DETAILS

Required for the assessment of individual needs

Class into which you wish to enrol your child (please tick)

Junior Infants Senior Infants 1st 2nd 3rd 4th 5th 6th

In pre-school, has your child had AIM support (equivalent to SNA support)? Yes No

For students transferring from another school:

If your child is transferring from another school, please note we may contact the school in connection with your child's enrolment

Name and address of School: _____

Consent

I/we give permission to contact my child's previous school to obtain information on their educational needs and progress.

Signed: _____ Date: _____

Please note: Irish is a compulsory subject for all students. Exemptions are only granted in exceptional cases.

Is your child currently studying Irish Yes No

If No please indicate the reason _____

Has your child had an educational report completed? Yes No

Have your child availed of resource teaching hours from the NCSE? Yes No

Has your child had access to an SNA? Yes No

Has your child received Learning Support? Yes No

Has your child received English as an Additional Language (EAL)? Yes No

If you answered Yes to any of the above questions our Special Educational Needs teacher will be in contact by phone to discuss your child's educational planning further.

PART 3 – MEDICAL DETAILS

Required to ensure the school has your doctor's contact details in order to contact a doctor in the event of a medical issue arising during school.

Doctor's Name: _____ Phone No.: _____

Health concerns for your child (medical condition, allergy etc.): _____

Procedures to follow (in the case of a particular illness): _____

Please note: Should your child require medication in school you will be asked to complete our Administration of Medication Form

PART 4 – PERMISSIONS

Personal Data on this form:

St. Senan's N.S. is a data controller under the Data Protection Acts 1988 and 2003. The personal data supplied on this application form is required for the purposes of:

- Student enrolment
- Student registration
- Allocation of teachers and resources to the school
- Determining a student's eligibility for additional learning support and transportation
- Examinations
- School administration
- Child welfare (including medical welfare)

School contacting you

Please confirm if you are happy for us to contact you by SMS/text message and to call you on the telephone numbers provided and to send you emails for all the purposes of: school events, parent teacher meetings, to notify you of school closure (e.g. where there are adverse weather conditions), to notify you of your child's non-attendance or any other issue relating to your child's conduct in school, to communicate with you in relation to your child's social, emotional and education progress and to contact you in case of emergency.

Tick (✓) box if 'yes' you agree with the following uses:

I give consent to:

Use my email address to alert me re school matters

Use my mobile phone number to send me SMS texts

Use my mobile phone/landline number to call me

Please note: St. Senan's N.S. reserves the right to contact you in the case of an emergency relating to your child, regardless of whether you gave your consent.

While the information provided will generally be treated as private to St. Senan's N.S. and will be collected and used in compliance with the Data Protection Acts 1988 and 2003, from time to time it may be necessary for us to transfer your personal data to other bodies, including the Department of Education & Skills, the Department of Social Protection, An Garda Síochána, the Health Service Executive, Tusla (Child & Family Agency) social workers or medical practitioners, the National Education Welfare Board, the National Council for Special Education, any Special Education needs Organiser, the National Education Psychological Service, or where the student is transferring to another school.

We rely on parents/guardians to provide us with accurate and complete information and to update us in relation to any change in the information provided.

Photographs and Digital Images of Students

The school maintains a database of photographs and digital images including video of school events held over years. It has become customary to take photographs of students engaged in activities and events in the interest of creating a pictorial as well as historical record of life at the school. Photographs/digital images may be published on our school website or in calendars, newsletters, local and national newspapers and similar school-related productions. In the case of website photographs/digital images, students' names will not appear on the website as captions to the picture. If you or your child wish to have his/her photograph digital image removed from the school website, school social media, calendar, newsletter etc. at any time you should write to the school principal.

I give consent for my child's photograph/digital image to be taken as part of school activities and used as referenced above or

I do not give consent for my child's photograph/digital image to be taken as part of school activities and used as referenced above

I give consent for my child to participate in online in-school programmes as selected by St. Senan's N.S. and under the supervision of the teachers

Parent/Guardian: _____ Date: _____

Permission to travel on School Trips/Outings/Tours/Sports Matches

I hereby give permission for my child to participate in school outings. I agree that my child be bound by the rules as laid down by the school authority on such trips. We have read the Code of Behaviour and will endeavour to ensure that my child complies with this code on all school outings.

Parent/Guardian: _____ Date: _____

PART 5 – CONTRACT OF BEHAVIOUR AND LEARNING

Parent/Guardian (Contract and Consent)

In registering my above named child as a student in St. Senan's N.S., I understand that this implies a full acceptance of the rules of the school as laid down from time to time by the Board of Management (available on our website www.stsenansns.ie or on request from the office).

I will provide copies of recent psychological or other professional educational assessments to the school. As a partner in the education of my child, I recognise the need for me to do my utmost to support the work of the school.

By signing below, I am giving full, explicit and informed consent for St. Senan's N.S. to confirm, retain, use and disclose the information I have provided in accordance with data protection legislation.

Signed: _____ Date: _____
Parent/Guardian 1

Signed: _____ Date: _____
Parent/Guardian 2

Checklist:

Parents/Guardians are asked to submit the following with this completed application form:

- Photocopy of Birth Certificate (long form)
- Photocopy of Baptismal Certificate
- Educational Psychologist/Occupational Therapist/Medical/any other relevant report attached.