

# Scoil Áine Naofa, Loch Cútra

Gort Inse Guaire, Co na Gaillimhe

Uimhir Scoile 17475S

Charities Regulator Reg. 20121815

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## ENROLMENT FORM

Please complete in <b>BLOCK CAPITALS</b>	<b>CLASS:</b>
<b>Pupil's Name:</b>	<b>Name in Irish: (Optional)</b>
<b>Date of Birth:</b>	<b>Male/Female</b>
<b>P.P.S. Number:</b>	<b>Country of Birth:</b>
<b>Address:</b>	<b>Nationality:</b>
	<b>If born outside the country, year of arrival in Ireland:</b>
<b>Eircode:</b>	<b>Languages spoken in the home:</b>
<b>Parent/Guardian Details</b>	<b>Parent/Guardian Details</b>
<b>First Name:</b>	<b>First Name:</b>
<b>Last Name:</b>	<b>Last Name:</b>
<b>Relationship to child:</b>	<b>Relationship to child:</b>
<b>Phone No (Home):</b>	<b>Phone No (Home):</b>
<b>Phone No (Work):</b>	<b>Phone No (Work):</b>
<b>Phone No (Mobile):</b>	<b>Phone No (Mobile):</b>
<b>Occupation:</b>	<b>Occupation:</b>
<b>email Address:</b>	<b>email Address:</b>
<b>Names of brothers/sisters in this school:</b> _____	
<b>Text-a-Parent: Choose Mobile Number which you wish to receive text-a-parent notification on:</b> <b>Mobile Number</b> _____	
<b>It is school policy to pass on the above information excepting Religion and Ethnicity to the Department of Education and Skills.</b>	

<b>Please tick</b>	<b>Yes</b>	<b>No</b>
<b>Are there any legal orders or other arrangements in place governing access to or custody of your child?</b>		
<b>The school may share Personal Pupil Data with other organisations such as HSE, Tusla, An Garda Síochána, etc, where there is a legal basis for doing so under GDPR.</b>		
<b>Name of Previous School/Pre-school:</b>		
<b>Address:</b>		
<b>Teacher's Name:</b>		
<b>Phone No:</b>		
<b>Additional local contact names, to be contacted in emergencies [Not the same as above]</b>		
<b>Name:</b>		<b>Phone No:</b>
<b>Relationship to child:</b>		
<b>Name:</b>		<b>Phone No:</b>
<b>Relationship to child:</b>		
<b>Name:</b>		<b>Phone No:</b>
<b>Relationship to child:</b>		

<b>Please tick</b>	<b>Yes</b>	<b>No</b>
<b>Have you attached a Birth Certificate for your child?</b>		
<b>Do you give permission for your child's Photograph to be used on the School's Website?</b>		
<b>Do you give permission for your child's photograph to be used in the school related Publications e.g., wall display/local Newspapers etc?</b>		
<b>Do you give permission for you child to attend school tours, outings and sport events or any other school related events that are organised and supervised by the school?</b>		

**Relevant Medical Information:**

**Family Doctor:**

**Phone No:**

**Any medical concern/information of relevance? (use a separate sheet, if required)**

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**Has your child attended a speech therapist? Yes ( ) No ( )**  
**If yes please give details**

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**Has your child attended an occupational therapist? Yes ( ) No ( )**  
**If yes, please give details**

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**Has your child attended an Educational Psychologist? Yes ( ) No ( )**  
**If yes, please give details**

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**Has your child any Special Educational Needs? Yes ( ) No ( )**  
**If yes, please give details**

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**Has your child any medical conditions we should know about? Yes ( ) No ( )**  
**If yes, please give details**

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**Medical Conditions: Asthma ( ) Epilepsy ( ) Heart Condition ( ) Diabetes ( )**  
**Other ( )**

**Medical Condition; Allergies ( ) Wasp Stings ( ) Food ( ) Other \_\_\_\_\_**

**Emotional Problems ( ) Details \_\_\_\_\_**

**Laterally - Right Handed ( ) Left Handed ( ) Mixed ( )**

**Additional Information – Please give details and specify any conditions not listed above which might be considered to affect the child’s ability to benefit from school. If there are any medical reports in relation to any of the above, could we please have a copy of same.**

**Is your child taking medication? Please detail**

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**Do you consent to your child being taken to doctor/hospital in the event of an emergency?**

**I consent ( )**

**I do not consent ( )**

Do you consent to allow your child to take part in the RSE and Stay Safe Programme?

**I consent ( )**

**I do not consent ( )**

Is there anything else about your child of which the school should be aware?

**I have thoroughly read the school's Code's of Behaviour and Discipline, Anti Bullying Policy, Mobile Phone Policy, Healthy Eating Policy and Homework Policy and will make every effort to ensure that my child/children complies with the terms of these policies.**

**School policies are available to view in the school by appointment or on our school website.**

I/we wish to enrol my/our child in Scoil Áine Naofa, Loch Cutra.

Signed: \_\_\_\_\_ Parent/Guardian Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Parent/Guardian Date: \_\_\_\_\_

**Both Parents/Guardians to sign**