



# Scoil Cholmcille

*Skryne, Tara, Co. Meath. C15 NV99*

*Uimh Rolla: 17521W*

**Phone:** +353 46 9025003

**Principal:** Mr. Tom Brennan

**E-mail:** [info@skrynenationalschool.ie](mailto:info@skrynenationalschool.ie)

**Deputy Principal:** Ms. Gráinne Harrington

**Web:** [www.skrynenationalschool.ie](http://www.skrynenationalschool.ie)

## **ENROLMENT APPLICATION FORM**

Pupil Forename: \_\_\_\_\_ Surname: \_\_\_\_\_

PPS no: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_

Birth Cert Forename (if different from name above): \_\_\_\_\_

Birth Cert Surname (if different from name above): \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_ Eircode: \_\_\_\_\_

Male:  Female:  Child's Nationality: \_\_\_\_\_

Residing in Skryne/Rathfeigh Parish: Yes:  No:

Father's Name: \_\_\_\_\_ Mobile: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work No: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mobile: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work No: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Who is the child's legal guardian: Mother:  Father:  Both:  Other: \_\_\_\_\_

Who does the child reside with: Mother:  Father:  Both:  Other: \_\_\_\_\_

Home Tel. No.: \_\_\_\_\_ Main Mobile No. for Texts: \_\_\_\_\_

Parent's Nationality: Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English? Yes  No

No of children in family: \_\_\_\_\_ Siblings in school (past or present): \_\_\_\_\_

Contact Name(s) & Phone No's. in the case of emergency:

1. Name: \_\_\_\_\_ Tel. No: \_\_\_\_\_

2. Name: \_\_\_\_\_ Tel. No: \_\_\_\_\_

### **Previous educational experience**

Name & Address of playschool/Montessori/creche attended: \_\_\_\_\_

Tel. No: \_\_\_\_\_ Dates attended (dd/mm/yyyy): **from:** \_\_\_/\_\_\_/\_\_\_\_ **to:** \_\_\_/\_\_\_/\_\_\_\_

Name & Address of previous school (if transferring from another school): \_\_\_\_\_

\_\_\_\_\_ Tel. No: \_\_\_\_\_

Dates attended (dd/mm/yyyy): **from:** \_\_\_/\_\_\_/\_\_\_\_ **to:** \_\_\_/\_\_\_/\_\_\_\_ Current Class: \_\_\_\_\_

Reason for transfer: \_\_\_\_\_

### **Additional Supports**

Is your child receiving any additional supports? Please tick the appropriate category / categories and provide details:

Physical  Hearing & Vision  Emotional / Behavioural  Educational  Autism Spectrum Disorder

Speech & Language  Medical  Occupational Therapy  Other

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Please attach copies of all available reports with this application. Information supplied will not be used in the admission decision-making process but will allow for the allocation of resources to meet pupils' needs.**

### **Medical History:**

Does your child have a diagnosed medical condition? (Please include allergy information in this section if applicable)

Yes:  No:

***If yes, please specify:***

Name of medical condition: \_\_\_\_\_

Name of family doctor: \_\_\_\_\_ Tel. No: \_\_\_\_\_

Doctor's address: \_\_\_\_\_

### **Consent Details**

During the course of the school year, all classes normally undertake a variety of different activities outside of the school premises (e.g. church visit, swimming, sports, tours). When we take the children on such outings, we increase the level of supervision as appropriate. We are seeking your consent for all such activities which may arise during the school year:

**Permission granted:**  **Permission withheld:**

On occasion, we publish photos/videos of pupils in local newspapers, on the school website and on school social media channels while engaged in school activities. This is done to positively promote our school and children are identified by first name only. We are seeking your consent to publish photos/videos of your child in line with the above:

**Permission granted:**  **Permission withheld:**

Computers, iPads and internet access in all classrooms give pupils a very powerful tool for learning. The school has a very comprehensive Acceptable Usage Policy, and we are asking for your consent to allow your child to access this technology in accordance with these guidelines, including the publication of their work in line with our policies:

**Permission granted:**  **Permission withheld:**

We are seeking permission for your child's playschool/school to complete an observation checklist where necessary to aid us in our allocation of resources and supports:

**Permission granted:**  **Permission withheld:**

The admission policy that is in existence when an offer of a school place is being made will be the policy that is applied to the application. This policy is available to read at [www.skrynenationalschool.ie](http://www.skrynenationalschool.ie).

I/We agree on behalf of our child to abide by the school Code of Behaviour (available to read on [www.skrynenationalschool.ie](http://www.skrynenationalschool.ie)):

I/We confirm that all information provided on this form is true:

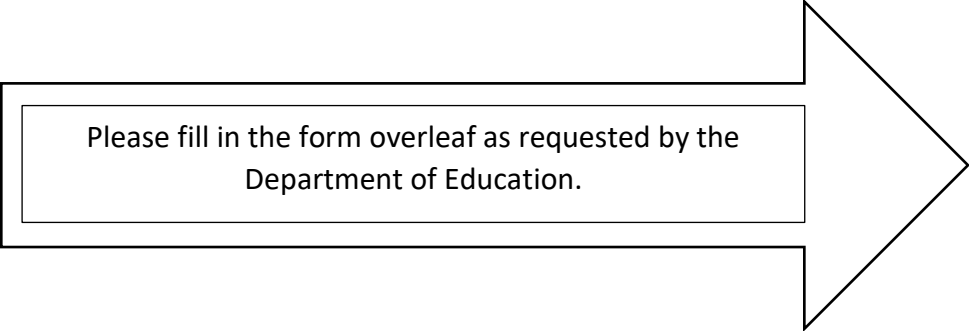
Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Mother/Guardian

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Father/Guardian

**Checklist**

- Application form fully completed & signed.
- Birth Certificate – Copy attached.
- Proof of address attached (utility bill in name of parent/guardian dated within last 3 months).
- Copy of End of Year School Report from previous school (if applicable).
- Other relevant reports (enable Ireland, Occupational Therapy etc.) if applicable.

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. IF INFORMATION IS OMITTED, IT MAY INVALIDATE THIS APPLICATION**



Please fill in the form overleaf as requested by the  
Department of Education.

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. 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 one)?**

- |                            |                          |                            |                          |                               |                          |
|----------------------------|--------------------------|----------------------------|--------------------------|-------------------------------|--------------------------|
| White Irish                | <input type="checkbox"/> | Irish Traveller            | <input type="checkbox"/> | Roma                          | <input type="checkbox"/> |
| Any other White Background | <input type="checkbox"/> | Black African              | <input type="checkbox"/> | Any other black background    | <input type="checkbox"/> |
| Chinese                    | <input type="checkbox"/> | Any other Asian background | <input type="checkbox"/> | Other (inc. mixed background) | <input type="checkbox"/> |

**What is your child's religion?**

- |                               |                          |                                      |                          |                  |                          |
|-------------------------------|--------------------------|--------------------------------------|--------------------------|------------------|--------------------------|
| Roman Catholic                | <input type="checkbox"/> | Church of Ireland (Incl. Protestant) | <input type="checkbox"/> | Presbyterian     | <input type="checkbox"/> |
| Methodist, Wesleyan, Orthodox | <input type="checkbox"/> | Jewish Apostolic or Pentecostal      | <input type="checkbox"/> | Muslim (Islamic) | <input type="checkbox"/> |
| Buddhist                      | <input type="checkbox"/> | Jehovah's Witness                    | <input type="checkbox"/> | Lutheran         | <input type="checkbox"/> |
| Atheist                       | <input type="checkbox"/> | Baptist                              | <input type="checkbox"/> | Agnostic         | <input type="checkbox"/> |
| Other Religions               | <input type="checkbox"/> | No Religion                          | <input type="checkbox"/> | No Consent       | <input type="checkbox"/> |

*I consent 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

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

For further information on POD please go to the Department of Education and Skills' website [www.education.ie](http://www.education.ie)