Enrolment Registration Form 25/26

Knocknagree National School

	Pupils Surname	
Date of Birth:		
Name of persons nominated and authoris	sed in writing to collect child/children from school:	
(1)		
(2)		
In an emergency, if parents are unavailable	ble, please give two Names and Tel. No. of persons to contact:	
Name (1)	Tel. /Mob. No:	
Name (2)	Tel. /Mob. No:	
Name of Family Doctor, address and tele	phone number:	
Does your child suffer from any illness e.	g. asthma, diabetes etc. or allergies No Yes	
If yes please state:		
for asthma or antibiotics, must now do so be brought to the class teacher properly	who needs to take medicine on a day to day basis e.g. inhalers o themselves under supervision of the class teacher. Medicine to labelled, in a container to be safely stored. Parents / Guardians and fill out a form. This form is available in the school.	
Togehere may administer personing and	diagnostic toote during your shild's time in Knocknogree National	
	diagnostic tests during your child's time in Knocknagree National rom the Support Teachers at the time of testing.	
	of the school curriculum for pupils from Senior Infants to Sixth AFE - A Parent / Guardian's Guide on www.staysafe.ie .	
If you have any questions or issues pleas	se contact the school.	
If you <u>do not wish</u> your child(ren) to pawriting.	articipate in this Programme please notify the school in	
Is your child Right/left handed:?		

Name of Pre-School/ Playgroup attended	ded by child (if any):		
Pupils transferring from another Pri	mary School:		
Name & Address of School:			
Reports and attendance records to be	forwarded by previous	school	
Photographs and Digital / Multi Medactivities photographs / media record may be published / displayed. Some school cannot control or be responsativities or events. However, we do	ling of your child may times photographs/vide nsible for photos or	be taken and, on some oc os are put on our School Insta videos taken during public pe	casions, gram. The
Please notify the school in writing recorded and we will do our best to			raphed or
Internet Use: Pupils have access precaution is taken by the school to internet access and this can be viewed Please notify the school in writing if	provide for online safe on our School website.	ty. We have an Acceptable Use	e Policy for
All pupils in Knocknagree are expected school website	I to follow the code of be	ehaviour. This is available to view	on the
I / We agree to support and abide by the	ne school Code of Beha	viour.	
Signature 1:		Date:	
Signature 2:		Date:	
Guardianship / Custody / Access Ar	rangement (If relevant	:	
For those children whose first lar	nguage is not Englis	h please complete the next s	ection
Country of birth: Mother:	Father:	Child:	
First language of Mother:	Father:	Child:	
Language spoken in home:			
Year of arrival in Ireland:			
Enrolment date in school in Ireland:			
Length of time child has received langu	age support:		

Please supply Birth Certificate

Baptismal certificate is required if child is baptised outside the Parish

These will be copied and returned

Please note: Parent / Guardian can request PPS No. from the Social Welfare Office.

Knocknagree National School Primary Online Database

The information on the Enrolment and Registration Forms will automatically be transferred to the Primary Online Database of the Department of Education and Skills. However, written parental consent to share level 2 data (Ethnic or cultural background and Religion) is being sought. Do you wish to share this information?

Please tick one Yes No
To which ethnic or cultural background group does your child belong (please tick one): Categories are taken from the Census of Population:
White Irish
Black African Any Other Black Background Chinese
Any other Asian background
What is your child's Religion:
Roman Catholic
Methodist, Wesleyan
(Greek, Coptic, Russian) Apostolic or Pentecostal Hindu Buddhist
Jehovah's Witness Lutheran Atheist Baptist
Agnostic Other Religions No Religion
No consent
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

Knocknagree National School

Additional Information

Private and Confidential

In our school we endeavour to provide the highest standards of pastoral care for your child. In order to achieve this objective successfully it is vital that the school be informed of any relevant situation regarding health, bereavement, domestic circumstances etc. Such information may be detailed here or alternatively you may contact the principal teacher or you child's class teacher directly. Any information will of course, be treated in the strictes confidence.
Data Protection The information provided in this form is necessary for the work of the school and is confidential to the school. However, from time to time the school is asked to provide information to the Health Board to facilitate their work such as immunisations, sight and hearing tests and dental appointments etc. Please sign below to signal your agreement that the details in Section 1 (Child's Personal Details) be made available to the Health Board.
Signed:
Signed: Date: