**\**Under GDPR guidelines please see Lisheen National School’s Privacy Statement and the DES Privacy Statement on the use of POD. These outline how we collect, use, store and safeguard your child’s personal data. Our Data Protection Policy is available to view on our school website or in the office****.*

**Enrolment Form for Lisheen National School**

Please read form carefully, fill it out and sign it, then return it to the school with a **copy** of the child’s **full birth certificate**. Under the Education Welfare Act, the school is required to inform the Education Welfare Officer where a child has had an absence of 20 + days.

**Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Present Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Post Code**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***(compulsory)*** **Male 🞎 Female 🞎**

**Date of Birth** \_\_\_\_ /\_\_\_\_ /\_\_\_\_\_\_\_\_\_ **PPS No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tel No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Emergency Contact No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred contact No to be given to Parent’s Association**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(this allows them to set up data base to keep parents informed of events).*

**Email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nationality***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* **Religion:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If not born in Ireland, date on which child arrived in Ireland:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mothers Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Maiden Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Country of Origin:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Marital Status**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Occupation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mobile No**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Father’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Country of Origin:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Marital Status:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Occupation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mobile No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Is the child living with both parents Yes 🞎 No 🞎**

**Number of children in the family:** \_\_\_\_\_\_ **Position in family (i.e. 1st,2nd, 3rd)** \_\_\_\_\_\_

**People who have permission to collect your child from school**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School Emergencies/Sickness/Unexpected Closures, etc.**

The following information will be used by the school in the event of:

* Your child feeling sick
* An emergency occurring while the school is in operation, making it necessary to close the school. In such an emergency, it is advisable to ensure a safe return home of pupils.
* An unexpected closure of the school.

If my child gets sick, or the school has to close unexpectedly etc. and there is no one at home/the school is unable to contact me, please provide names of two other people you nominate us to contact to collect your child/children.

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Has your child attended playschool:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of playschool**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Contact No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I/We the Parents of** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **give consent to the Principal of Lisheen N.S. to access all records and reports pertaining to my child(ren) from the Principal of his/her previous school(s).**

**Signature of Parent(s) / Guardian**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***(It is school policy to contact the child’s previous school for a report on the child).***

**Is your child toilet trained?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Any medical condition, which the school should be aware of?**

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

**Has your child any physical or mental disabilities? If so are there any specific equipment/ resources that the school will require for your child?**

**Does your child have any allergies which are life threatening?**

**e.g. nuts/bee stings etc. Yes 🞎 No 🞎**

**Does your child use an inhaler in school? Yes 🞎 No 🞎**

***(If yes, it is your responsibility to inform the class teacher of this)***

**Has your child attended or is she/he attending any of the following:**

**Speech & Language Therapist Yes 🞎 No 🞎**

**Occupational Therapist Yes 🞎 No 🞎**

**Physiotherapist Yes 🞎 No 🞎**

**Have you an Educational Assessment on your child? Yes 🞎 No 🞎**

**In the event of a medical emergency, do you give permission for your child to be taken to the doctor/hospital? Yes 🞎 No 🞎**

**Do you wish your child to participate in the Relationships and Sexual Education Programme and the Stay Safe Programme? Yes 🞎 No 🞎**

**Does the school have permission to carry out educational screening tests on your child? Yes 🞎 No 🞎**

**Do you give permission for photographs/videos of school events to be taken and/or published on the School Website, School App, School Notice Board, School Television at entrance of school, Parish newsletters, and newspapers?**

 **Yes 🞎 No 🞎**

**I/We,** **the parent/s of** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **give consent for my child to attend educational projects\* during school term which may occur outside the school grounds and may involve transporting my child to these events. (Permission will be sought for swimming and tours). \*e.g. practices in the church; visiting the library, sports centre; arts centre; community schools, etc.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**: \_\_\_\_\_\_\_\_\_\_\_\_ **Signature of Parent(s) / Guardian.**

**I am aware that the Anti-Bullying Policy and Child Safeguarding Statement and Risk Assessment are available for viewing on the School Website/School App and a designated area of the school.**

**I/ We have read and agree to abide by the Code of Discipline for Lisheen National School.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**: \_\_\_\_\_\_\_\_\_\_\_\_ **Signature of Parent(s) / Guardian.**

***The following information will be stored on the Primary Online Database as requested by the Department of Education and Skills. Parental Consent must be obtained.***

***Please fill out and sign the consent below.***

To which ethnic background does your child belong?

□ White Irish

□ Irish Traveller

□ Roma

□ Black African

□ Chinese

□ Any other white background

□ Any other black background

□ Any other Asian background

□ Other

□ No Consent

What is your child’s religion:

□ Roman Catholic

□ Church of Ireland including Protestant

□ Presbyterian

□ Methodist

□ Jewish

□ Muslim / Islamic

□ Orthodox

□ Pentecostal

□ Hindu

□ Buddhist

□ Jehovah’s Witness

□ Lutheran

□ Atheist

□ Baptist

□ Agnostic

□ Other Religion

□ No Religion

□ No Consent

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is one of the Pupil’s mother tongues (language spoken at home)

Irish / English. Yes □ No□

I consent for POD specific 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

 Parent / Guardian

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

## **To be completed if your child is transferring from another Primary School**

**Previous School:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

**Telephone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What class was your child in when he/she left the school?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Transfer:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

## **Have you enclosed a copy of the most recent school report and attendance record? Yes 🞎 No 🞎**

**N.B. All forms: must be completed in full and returned to the school before a new pupil will be enrolled in the school. Proof of address must accompany application.**

## **General School Policy and Code of Behaviour 🞎**

**Internet Permission Form 🞎**

**RSE Policy Consent Form 🞎**

**Medical Form 🞎**

**Enrolment Application Form 🞎**

**Birth Certificate 🞎**

**Note: We require reports from previous schools in order to meet the needs of your child.**