

Corrandrum N.S.S. N. Cor an
Claregalway, Baile Clár na
Gaillimhe



Droma.
Gaillimhe Co. Galway. Co. na

Tel: 091 791715 R. N. 15796 F

Enrolment Application for Admission of New Pupils

The Department of Education and Skills has developed an electronic database of primary school pupils called the Primary Online Database (POD) which involves schools maintaining and returning data on pupils to the Dept. at individual pupil level on a live system. This information will be used to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting. The database will hold data on all primary school pupils. The database will also contain, on an optional basis, information on the pupil's religion and on their ethnic or cultural background. The data required for POD is marked with an asterisk * and will only be uploaded to POD if your child is enrolled. All other data we need for the efficient running of the school. In order to assist with the gathering of data please complete the form in CAPITAL LETTERS and return to the school. This form will be retained by the school.

* Pupil First Name: _____ * Pupil Surname: _____

* Birth Cert First Name (if different from above) _____ * Birth Cert Surname (if different from above) _____

* Pupil _____ Address: _____

"Date of Birth: _____ *PPSN _____ * Gender: Male [] Female [] * Mother's maiden name _____ * County _____ * Nationality _____

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

* Religion _____

Do you consent to uploading data relating to religion to POD Yes [] No []

* To which ethnic or cultural background group does your child belong (please tick one)?

White Irish Irish Traveller [] Roma [] Black African []

Any other White Background [] Any other Black Background [] Chinese [] Any other Asian background [] Other (Inc. mixed background) []

DO you consent to uploading data relating to ethnicity to POD Yes []

The following information is required for the efficient running of the school and will not be uploaded to POD.

E-mail: _____ * Eircode: _____

Age at school entry (in years and completed months) _____

Telephone No. (home) _____ Mobile No. Father _____ Mother: _____

Father's Occupation: _____ Mother's Occupation: _____

In case of emergency:

Contact 1 Name: _____ Mobile: _____

Contact 2 Name: _____ Mobile: _____

Contact 3 Name: _____ Mobile: _____

Name _____ of _____ Nursery/Playschool/other _____ school _____ (if _____ any): _____

Number of years in playschool: _____

Total Number of children in family: _____ Place in family (eg first/second child): _____

No. of siblings in the school: _____ Classes: _____

Please tick boxes as appropriate:

Birth History	Normal { }	Abnormal { }	Comment _____

Developmental Milestones:

Walking (by 18 months)	Comment _____

Talking (by 2 years)	_____

Toilet Trained (by 3 years)	_____

Laterality	Right-Handed	Left-Handed	Mixed
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Childhood Illnesses:

Comment - type, duration, hospitalisation etc.

Medication:

Give details and specify if medication is to be given in school. Please ask and complete Administration of Medicines Consent Form.

Allergies (if any):

Family Doctor: Name: Mobile:

Other Adverse Circumstances:

Give details and specify any condition not listed which might be considered to affect your child's ability to benefit from school.

Referral to Other Agencies:

Has your child been referred to any other outside agency (speech therapist, social worker, psychologist, specialist)?

Yes { } No { } Comment:

Please tick boxes as appropriate:

	Satisfactory	Unsatisfactory	Comment
1. Vision			<hr/>
2. Hearing			<hr/>
3. Physical Co-ordination			<hr/>
4. Speech (articulation)			<hr/>
5. Language:			<hr/>

Inclusion of our child's photographs on our school website:	YES: NO
Inclusion of our child's photographs in a local/national newspaper:	YES: NO
Information may be shared with other agencies e.g HSE. who require it:	YES: NO
Our child is allowed to attend school outings and trips	YES: NO

- Expression _____

- Comprehension _____

6. Temperament

7. Sociability

8. Concentration

9. General Alertness

Please answer YES or NO to the following (please circle as appropriate):

We give permission for our child to receive additional help from Learning Support in school:	YES: NO
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(Parents will be notified should it be recommended that their child would benefit from L.S)

Our child is allowed to take part in the Relationships & Sexuality Education (RSE) Programme:	YES: NO
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Our child is allowed to take part in the Stay Safe Programme:	YES:
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Our child can be taken to hospital in case of emergency if we cannot be contacted:	NO
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YES:
NO

Our child is allowed to use the internet in school under supervision in accordance with the school's Internet Acceptable Use Policy (Department of Education and Skills filtered internet access only) YES : NO

Our child's uniform being changed by adult member of staff in case of illness or toilet accident:	YES: NO
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Use of a nominated mobile number by the school for Text-a-Parent and emergencies.

Please nominate mobile number(s): _____

We will support & co-operate with the staff of the school.

NB: Please ensure that a photocopy of your child's BIRTH CERTIFICATE are returned along with the

Application Form.

We agree to abide by the policies of Corrandrum National School.

Signature Parent/Guardian 1:

Date: _____

Signature Parent/Guardian
2:

Date: _____