



KILBEG NATIONAL SCHOOL
APPLICATION FOR ENROLMENT 2021

Section 1: The Child

Child's Name: _____ Date of Birth: _____

Surname in Irish: _____

Child's Home Address: _____

Eircode : _____ Email: _____ Home Tel. Number: _____

Child's P.P.S. number: _____ Nationality: _____

Religion _____ Place of Baptism _____

Previous school, (report must be included) or Playschool attended

Please note the above information will be uploaded to the Primary Online Database system as required by the Department of Education and Science.

Section 2: Parents/Guardians

Mother's /Guardian's Name: _____ Home Tel. No. _____

Address: _____ Mobile No. _____

Occupation _____ Work No. _____

Father's /Guardian's Name: _____ Home Tel. No. _____

Address: _____ Mobile No. _____

Occupation _____ Work No. _____

Contact number for Text a Parent messages : _____

Does any legal order under the family law exist that the school should know about? _____

If 'Yes' is there any person into whose custody your child should not be given? Please attach details.

Section 3: Health:

Child's Doctor _____ Phone No. _____

Has your child ever been referred to Enable Ireland? Yes No

If yes, please give brief details for referral

Please List any medical conditions that your child has

Has your child ever attended: (a) Speech Therapist (b) Occupational Therapist
(c) Psychologist (d) Counselling (e) Other (give details) _____

If 'yes' a copy of reports/assessments should be given to the school.

Most Recent Appointment: Date: _____

Is your child allergic to any medicine/substance? Yes No

If yes please give details; _____

In the event of illness, whom should we contact? _____

It is essential that we have a phone number of someone we can contact in an emergency, if you are not available

Name:	Phone No.	Relationship to child
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Should any of these numbers change please inform us immediately. In the event of an emergency, should we fail to contact you, do you give permission to us to bring your child to the doctor on duty / hospital? Yes. No.

Section: 4

Do you give permission for your child to take part in the Stay Safe and RSE Programmes?

Yes No

Do you give permission for your child to go on school trips/tours under teacher supervision during the school day eg. Trips to local historical buildings, the church etc.? Yes No

Over the course of Primary School life, the staff may take photographs of the children or their work. We may use these images in our school or in printed publications, on the school Facebook page/ website as well as on project display boards at school. We may also take video or webcam recordings.

Do you give consent for your child's image/work to be used in these situations? Yes No

Sometimes journalists visit our school to take pictures of the children eg. Awards/ prizes, sporting events, first day at school etc. Do you give permission for your child to be photographed for school projects, newspapers and school related activities? Yes No

The Board of Management will not be responsible for pictures/videos taken by parents at school concerts/celebrations/ sporting events etc.

Section 5

Parents are legally obliged to send their child to school and give reasons for absences. Under the Education Welfare Act 2000, we are compelled by law to report any child who misses a total of 20 or more days during the school year to TÚSLÁ. The school's Attendance Policy and other relevant policies can be viewed on the school website at kilbegns.ie

Section 6

- I certify that the information I have given in this form is correct.
- I have attached all assessments/reports relating to my child's development and/or needs.
- I confirm that I have received and read a copy of the Enrolment Policy and the Code of Discipline.
- I agree that the pupil enrolled herewith will be subject to those codes and policies.
- I consent to the administration of all relevant screening tests to the above name pupil.
- I further undertake that he/she will comply fully with all School Rules in Kilbeg National School.

Parent's/Guardian's
Signature(s) _____

Date: _____

Please return this form to the school with your child's Small Birth Certificate and Baptismal Certificate.