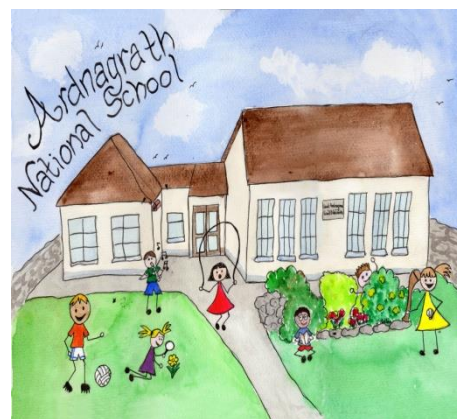


Ardnagrath National School
Walderstown
Athlone
Westmeath
Phone: 09064 85572
Email: ardnagrathns20@gmail.com



School Enrolment Form

Any information you give on this form will be treated with the strictest confidence and only used for the benefit of your child.

Childs Information:

Name of child as on Birth Certificate:

Male/ Female: Mother's Maiden Surname:

PPSN:

(The PPSN is required by the Department of Education and Skills)

Date of Birth:

Address:

.....

Email:

Nationality: Religion:

Eircode:

Parents/Guardian Information:

Name: Name:

Occupation: Occupation:

Nationality: Nationality:

Language/s spoken at home:

Home phone No: Mobile No. For "text a parent":

Mobile no.1: Mobile no.2:

Person to contact if both parents are not available:

Doctor/Medical Information:

Doctors Name:..... Doctors no.:.....

Doctors Address:.....

.....

If your child has a medical conditions please give details:.....

.....

Has your child any Allergies:.....

Do you give permission to take your child to hospital in case of a serious illness or accident?

.....

Do you authorise any procedure necessary in the hospital?

Baptism

Place and date of Baptism:.....

(Please attach copy of Baptismal certificate if child was baptised outside the parish)

Preschool/ Previous school

Number of Children in family: Name of Siblings attending N.S:.....

Did your child attend Preschool?

Name and Address of Pre School/National School Previous attended:.....

.....

.....

Plases complete the following with a yes or no answer:

Photography/Internet/Website

1. Would you like your child to have supervised access to the internet?.....
2. Do you give permission to have your child’s name as a part of school activities on our school website?.....
3. Please visit our school website www.ardnagrathns.com Do you give permission for your child’s photo without their name to be used on our school website?.....

General Questions

4. Do you wish to give your child permission to go home at lunch?.....
5. Does any legal order under family law exist that the school should know about?
.....
6. Would you like your child to participate in the Stay Safe Programme?.....

7. Sometimes the school is required to pass on the names of children and their address to the Health Board for immunisation purpose, to other school's if children are transferring, to sporting bodies when children are taking part in game outside the school. Do you allow the school to pass on this information to these bodies?.....
8. Do you give permission for your child to go on school trips under teacher supervision during the school day e.g. trips to local town parks, local historical buildings etc?
.....
9. Due to the new data protection regulations that come into effect from may 2018. To ensure. Sometimes journalists visit our school to take pictures of children e.g. awards/prizes, sporting events, first day at school etc. Do you give permission for your child to be photographed for school projects, local newspapers and school related activities?

The school teaches Relationships and Sexuality Education (RSE) using the guidelines provided by the Department of Education and Skills. If you would like to view the content of the programme used in the school for teaching RSE you are welcome to do so. If you have any concerns with regard to RSE please make an appointment with the principle to discuss your concerns.

I agree to support the Board of Management and Staff in their implementation of school policies which are available to be viewed by appointment and providing a positive learning experience for all children in the school.

Parent/Guardian Signature:.....Date:.....

Parent/Guardian Signature:.....Date:.....

If any of the details in this form change e.g. If you move house, change your phone number etc.

Would you please inform the school at the earliest opportunity.

*Principal: Amelia Keena
Deputy Principal: John Keane*