



8) To comply with the implementation of Scoil Naomh Eltin's Internet Acceptable Use Policy

Yes  No

9) To give my contact details to the HSE School Nurse, Doctor and Dentist

Yes  No

10) To the inclusion of the information provided on this Enrolment Application Form to the Department of Education's Primary Online Database upon my child's enrolment in Scoil Naomh Eltin

Yes  No

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please make sure the school is aware as early as possible of any family situation such as bereavement, separation, custody issue or ill health that could impact on your child, so that we can be as supportive as possible.**

Please attach a copy of your child's Birth Certificate and Baptismal Certificate (if applicable) as this is required for enrolment purposes.

Places will be allocated in compliance with Scoil Naomh Eltin's Enrolment Policy.

All school policies can be accessed on our school website at [www.scoilnaomheltin.ie](http://www.scoilnaomheltin.ie)

The Stay Safe and Relationships and Sexuality Education Programmes are part of the Social Personal and Health Education Curriculum which primary schools are required to implement.

**Thank you for providing the information requested in this 'Enrolment Application Form'. The information supplied will assist us in supporting your child if/when he/she is enrolled as a pupil in Scoil Naomh Eltin. The information will be treated as private and confidential and will be released to staff members on a need to know basis only.**

## Enrolment Application Form

Please fill this form in full

### A) Child's Details

Child's Full Name (as on Birth Certificate)

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Language spoken at home: \_\_\_\_\_

PPS No: \_\_\_\_\_

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

### B) Religion

Religion: \_\_\_\_\_ Baptised: Yes  No

Place of baptism (if applicable): \_\_\_\_\_

### C) Previous Education

Has your child attended a pre-school: Yes  No

Previous primary school (if any): \_\_\_\_\_

Class your child is entering: \_\_\_\_\_

### D) Family Details

Number of children in the family: \_\_\_\_\_

Place of this child in the family: \_\_\_\_\_

Names of other children currently attending Scoil Naomh Eltin:

\_\_\_\_\_

**E) Contact Details:**

Father's First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Occupation: \_\_\_\_\_ Contact No: \_\_\_\_\_

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

Mother's First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Occupation: \_\_\_\_\_ Contact No: \_\_\_\_\_

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

Emergency Contact Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Contact No: \_\_\_\_\_

TEXT-A-PARENT MOBILE NUMBER: \_\_\_\_\_

**One number only per family.** This number will receive text message from school with school updates or reminders.

**F) Medical History**

Does your child suffer from any medical conditions which may affect your child attending school?

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If your child has been referred for professional help to a speech therapist, psychologist, social worker or any other specialist, please give details

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Report Available: Yes  No

Family Doctor Details:

Name: \_\_\_\_\_

Contact No: \_\_\_\_\_

**G) Permission**

I/We consent to the following:

- 1) To comply with the implementation of Scoil Naomh Eltin's Code of Behaviour including the school rules  
Yes  No
- 2) To comply with the implementation of Scoil Naomh Eltin's Home/School Partnership Policy including the complaint/concern procedure  
Yes  No
- 3) To a doctor being contacted and my child being taken to hospital in case of an emergency, if I/we cannot be contacted  
Yes  No
- 4) To the inclusion of my child's photograph or video clip on the school website or for school events being reported on, in local or national newsletters and newspapers  
Yes  No
- 5) To my child's uniform being changed by a staff member in the presence of another staff member in case of illness or a toilet accident  
Yes  No
- 6) To the inclusion of my child in Liturgical Celebrations and participation in the Catholic Religious Education Programme in keeping with Scoil Naomh Eltin's Catholic ethos (e.g. School Mass, Sacrament of Reconciliation etc.)  
Yes  No
- 7) To give permission for my child to go on school trips under teacher supervision (e.g. trips to the local town park, local historical buildings, school matches, school tours etc.)  
Yes  No