# Scoil Charthaigh Naofa, Rahan, Tullamore, Co. Offaly

Phone: 057 9355393 Email: rahannationalschool@gmail.com Roll No.: 20273A

### APPLICATION FOR ENROLMENT

**CHILD TO BE ENROLLED:**

Name in Full: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ P.P.S. No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address in Full: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**PARENTS:**

Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation (Optional):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation (Optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Maiden Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE NUMBERS:** Mother: HOME\_\_\_\_\_\_\_\_\_\_\_\_ WORK\_\_\_\_\_\_\_\_\_\_\_\_ MOBILE \_\_\_\_\_\_\_\_\_\_\_\_\_

Father: HOME\_\_\_\_\_\_\_\_\_\_\_\_ WORK\_\_\_\_\_\_\_\_\_\_\_\_ MOBILE \_\_\_\_\_\_\_\_\_\_\_\_\_

**NAME OF PERSON(S) WHOM SCHOOL MAY CONTACT IN ANY EMERGENCY WHEN NEITHER PARENT IS AVAILABLE:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **PHONE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**DATE & PLACE OF BAPTISM:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please attach Baptismal Cert. if child was baptised outside the parish.***

**IRISH VERSION OF CHILD’S NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Otherwise school will translate

##### DO YOU GIVE PERMISSION:

##### (1) TO TAKE THE CHILD STRAIGHT TO HOSPITAL IN CASE OF A SERIOUS ILLNESS OR ACCIDENT? \_\_\_\_\_\_\_\_\_\_\_\_\_

**(2) FOR YOUR CHILD’S PHOTO / WORK TO BE PRESENTED ON THE SCHOOL WEBSITE/MEDIA OUTLETS?** \_\_\_\_\_\_\_\_\_\_

**(3) TO CHANGE YOUR CHILD’S CLOTHING IF NECESSARY? \_\_\_\_\_\_\_\_\_\_**

**(4) FOR YOUR CHILD’S NAME TO BE INCLUDED ON THE CLASS LIST SENT TO THE HSE (dental, eye clinic etc.)? \_\_\_\_\_\_\_\_**

**DOES ANY LEGAL ORDER UNDER FAMILY LAW EXIST THAT THE SCHOOL SHOULD KNOW ABOUT? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IS YOUR CHILD ELIGIBLE TO APPLY FOR FREE TRANSPORT (nearest school & living 5k from school)?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### MEDICAL

**NAME OF FAMILY DOCTOR:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **PHONE:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS OR ALERGIES THAT THE SCHOOL SHOULD KNOW ABOUT (e.g.**

**ASTHMA, EPILEPSY, DIABETES ETC.)?** **Yes No**

Please give details, including what action should be taken in an emergency. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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###### PREVIOUS PRE SCHOOL/ SCHOOL

If this is not your child’s first school, please give the following information:

**NAME & ADDRESS OF LAST SCHOOL**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**ENROLMENT DATE IN LAST SCHOOL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CURRENT CLASS:** \_\_\_\_\_\_\_\_\_

**REASON FOR TRANSFERRING CHILD:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**HAS YOUR CHILD ANY SPECIAL EDUCATIONAL NEEDS (*SIGHT, HEARING, SPEECH, LEARNING DIFFICULTIES, PHYSICAL DIFFICULTIES, OTHER)*? Yes No**

Please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HAS YOUR CHILD EVER:**

(1) REPEATED A CLASS? \_\_\_\_\_ (2) RECEIVED LEARNING SUPPORT/RESOURCE? \_\_\_\_\_ (3) BEEN PSYCHOLOGICALLY ASSESSED? \_\_\_\_

(4) ATTENDED SPEECH AND LANGUAGE\_\_\_\_\_ (5) OCCUPATIONAL THERAPIST\_\_\_\_\_\_

Please give details (E.G. Who child attended and when ): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**ANY OTHER INFORMATION THAT THE SCHOOL SHOULD BE AWARE OF (e.g. change in family circumstances etc.)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**I/WE UNDERSTAND THE ETHOS OF THE SCHOOL AND ACCEPT THE SCHOOL’S CODE OF BEHAVIOUR:**

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Parent / Guardian) Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Parent / Guardian) Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE ATTACH CHILD’S BIRTH CERT. AND BAPTISMAL CERT. IF BAPTISED OUTSIDE THE PARISH. THESE WILL BE PHOTOCOPIED AND RETURNED.**

The details on this form remain in place while your child is in this school. Please inform us in writing of any changes of address , telephone etc.

The acceptance of an application merely confirms that it will be assessed under the criteria outlined in Scoil Charthaigh Naofa’s Enrolment Policy, and does not confer any further status on that application. A full copy of the Enrolment Policy is available from the office.