

Ratoath Senior National School

Fairyhouse Road, Ratoath Co Meath. Ph 8254470 - Fax 8257118 - Email admin@ratoathns.com

APPLICATION FOR ENROLMENT

Family name of pupil: _____ First Name(s): _____

Name in Irish (if known): _____

Starting Month: _____ Year: _____ For Class: _____

Home Address: _____

Home Tel No: _____ Child's PPS No: _____ Date of Birth: __/__/__

Country of Birth: _____ Country of Family Origin: _____

If English is not the child's first language please state which language: _____

Was your child receiving support in learning English as a foreign language? yes / no

Religion: _____ Male /Female Right Handed / Left Handed

	Name	Occupation	Contact Phone No.
Mother			
Father			
Other Contact			

*Siblings in this school or
Ratoath Junior National School*

Name :	Class:

Position in Family (1st, 2nd etc.): _____ No of children in family _____

How do you wish to receive school notes? email: in schoolbag: both:

E-mail Address: _____

Stay Safe Programme Permission: yes / no

Internet Usage Permission (see attached Acceptable Use Policy) yes / no

Do you accept the Code of Discipline and Behaviour? yes / no

Do you accept the Anti-Bullying Policy in use in Ratoath S.N.S? yes / no

Do you consent to your child going on school outings which may involve travelling under supervision in a coach or walking under supervision? yes / no

Do you consent to your child's photograph being taken for the school calendar and the school website (see attached Acceptable Use Policy)? yes / no

Do you consent to your child receiving literacy and/or numeracy support if necessary? yes / no

Denominational Character : Roman Catholic under the patronage of Most Reverend Dr. Michael Smith, Bishop of Meath.

Do you wish your child to participate in the school religion programme (usually 30 mins per day) yes / no

Provision is made for children of other religions to do other work during this period

The information on this form will last for the duration of your child's time in Ratoath Senior National School. You have the right to change your consent at any time or to withdraw your consent. You also have the right to give your consent or withdraw your consent for any particular occasion/event which may occur during your child's time in school. It is your responsibility to inform the school of any such change.

Has your child ever received: Resource Hours, Learning Support or required a Special Needs Assistant in previous Schools? yes / no

(If yes please forward details)

Do they still qualify for such help? yes / no

Has your child any Special Needs? yes / no

If your child has any Special Needs, please supply details...

Please attach or forward any relevant reports or assessments.

Your Previous Address: _____

All Previous Schools Attended:

Name :	For Class :	Address / Tel No.:

Have you formally informed the last school of this transfer? yes / no

Permission is hereby granted for my child's / children's previous school to forward all relevant reports, assessments, psychological reports and medical reports which they have on file to Ratoath S.N.S. yes / no

Please attach or forward Copies of any records and reports from the previous school

MEDICAL INFORMATION

Completed forms will be kept in your child's personal file in the school. It is important that you advise us with regard to your child's health, as the teacher may need to be aware of any medication or treatment, which he/she is receiving.

Doctor's Name: _____ Tel No. _____

No medical problems to declare:

Medical Information : _____

Details of Medication being taken (if any):

Emergency Situations:

Whereas every effort will be made to make contact first with a parent or guardian, in cases of emergency a child or children will be brought to a doctor or hospital at the teacher's or Principal's discretion.

We / I **agree** with the emergency procedure outlined:

We / I **do not agree** with the emergency procedure outlined:

Signed (Mother): _____

Date: ___/___/___

Signed (Father): _____

Date: ___/___/___

[please attach or forward a copy of the pupil's Birth Certificate]