



Application Form/Pupil Information Database

Child's full name:.....

**Usual version of child's name
 (If different from above):**.....

**Irish version of child's name
 (Otherwise school will translate):**.....

Date of Birth:.....**P.P.S. Number:****Year when starting school:**

Father's/Guardian's Name:.....

Mother's /Guardian's Name and Maiden Name:.....

Home Address	
Please supply numbers at which you are contactable in case of emergency	<p>Home _____ Work _____</p> <p>Mobile 1 Name: _____ No. _____</p> <p>Mobile 2 Name: _____ No. _____</p> <p>One mobile no. for Text-a-Parent: _____</p>
Alternative emergency contact numbers 2 please.	<p>1.Name: _____ ☎ _____</p> <p>2. Name: _____ ☎ _____</p>
Family Doctor:	<p>Dr. _____</p> <p>Address: _____</p> <p>☎ _____</p>

Religious Denomination:.....

Date and place of Baptism:.....

Father's occupation:.....

Mother's occupation:.....

Nationality:

Ethnic or Cultural Background:.....

Name of any Playschool/previous school(s) attended:..... **Class**

If transferring from another Primary School, please bring letter of transfer, together with attendance record, results of standardised tests and special needs' requirements

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

Details:

(The school should be made aware of any court order, which affects the child's welfare and also the name of any person into whose custody the child should not be given.)

Does your child have a medical condition which should be noted? ✓ ✗

If Yes please supply details:

Administration of Medicines Policy

In the interests of the Health and Safety of all pupils, Parents and Guardians of a pupil requiring medicine during school hours should write to the Board of Management for permission and obtain a copy of our school's "Administration of Medicines" Policy

Additional Useful Information

If there is any other information regarding your child's welfare which you feel would be of assistance to us, please indicate below or if the information is of an extremely sensitive nature, please make an appointment to speak with the teacher or principal.
Information such as a Junior Infant's difficulty with toilet training, coping with buttons, fears, health issues etc may be relevant.

If your child is absent from school, Department of Education and Science guidelines request an explanation in writing for the reason for absence. These notes must be retained by the school for a period of one year. For this reason, **IT IS NOT SUFFICIENT TO WRITE A NOTE IN THE CHILD'S HOMEWORK DIARY.** A template is provided by the school for this purpose and is attached. Additional copies are available on the school website.

Signed: _____ *Parent/Guardian*

Please return this form to above address, together with a Birth Certificate. This will be copied and original returned to you.