

Admissions Form for September 2022

Scoil Bhríde National School

Ballydehob, Co. Cork

Email: contactscoilbhríde@gmail.com

Tel/Fax: 028 37161

Roll Number: 14225D



1. Personal Details (All information required)

Student Surname	
Student forename	
Home Address	
	Eircode:
Email	
Date of Birth	
Birth Cert Attached	Yes <input type="checkbox"/> No <input type="checkbox"/> (Please tick appropriate box) Please send in at your earliest convenience
Pupil's PPS Number	
Name known by (if different from above):	
Pupil's Name in Irish:	
Enrolling in Class:	

2. Family Details (All information required)

Parent/Guardian Names:	1)
	2)

Addresses if different from above:	1) 2)
Parent/Guardian Phone Numbers:	1) Mobile: Home: Work:
	2) Mobile: Home: Work:
Please Nominate <u>one mobile number</u> which we will contact you on: Please notify the school of any changes to this number. It is for essential contacting purposes.	
Correspondence should be addressed to:	Both Parents/ Guardians <input type="checkbox"/> Or A nominated Parent/Guardian <input type="checkbox"/> If so, please specify:
Email Address:	1)
	2)
No of Children in the family:	
Enrolled Child's place in the family:	
3. Emergency Contacts (All information required)	
Doctor's Contact Information:	Name: Phone Number: Address:
Please specify 2 Extra Emergency Contacts you would like to nominate:	
Emergency Contact 1:	Name: Phone Number:

Emergency Contact 2:	Name: Phone Number:
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4. Extra Information Required by the School

Religion:	
Nationality:	
Will your child be receiving Sacraments:	
Name of person/s who have permission to collect your child from school: N.B Please notify the class teacher of any changes to these arrangements.	
Was your child enrolled in a previous school? (Name of school if relevant):	
Reason for transfer (if applicable):	
Does your child suffer from any allergy, illness, hearing, sight, speech or physical impairment? Please give relevant details below:	
Does your child have additional needs? Please give relevant details and reports to the principal:	

Any other information you feel is relevant/ important:
Confidentiality is assured.

5. Consent Signatures

N.B Emergency: In case of an emergency (or where I cannot be contacted) I consent to the teachers of the school seeking whatever medical assistance they consider to be necessary and available to my child.

Parent(s)/Guardian(s) Signature:
Date:

I consent to the Stay Safe programme in use in this school. Please see www.staysafe.ie for information.

Parent(s)/Guardian(s) Signature:

In line with Scoil Bhríde's Data Protection Policy – I/we agree to the use of my/our child's name or photograph being used in any type of publicity material, such as local papers, websites, newsletters etc. - in the event of them participating in any competition, fundraising or sporting event, presentations - or to do with any other school related activities. Also at Confirmation or Communion times and for other religious services, items may be displayed in the Church that may include names and/or photos of Scoil Bhríde pupils. From time to time the HSE or other government departments may request personal information from the school and I/we permit the school to forward such information.

Parent(s)/Guardian(s) Signature:

By seeking to enrol my child (name) _____ in Scoil Bhríde, Ballydehob and having read the copies of the Enrolment Policy, Code of Behaviour and the Anti-bullying Policies, I/we accept the terms of these policies and all other Scoil Bhríde policies ratified by the Board of Management.

Parent(s)/Guardian(s) Signature:

The following question is in relation to POD (Primary Online Database) that we are obliged to ask as instructed by the Department of Education.

To which ethnic or cultural background group does your child belong.

- ☐ White Irish
- ☐ Irish Traveller
- ☐ Roma
- ☐ Any other White Background
- ☐ Black African
- ☐ Any other Black Background
- ☐ Chinese
- ☐ Any other Asian Background
- ☐ Other, including mixed race backgrounds

I Consent for this information to be stored on the Primary Online Database (POD) and transferred to the Department of Education and Skills and any other primary schools my child may transfer to during the course of their time in primary school.

Signed:

Date:

Please detach and keep
Important Information

Gates open at 9.05am

School Hours: 9.20am – 3.00pm (2.00pm Infant Classes)

Break-times: 11.00am - 11.05am – Eating Time

11.05am - 11.15am – Play Time

1.00pm - 1.10pm – Eating Time

1.10pm - 1.30pm – Play Time

Uniform: Available from Barnett's of Schull or Burkes of Bantry

- Teal jumper with black v neck
- Grey trousers/skirt/ black shorts for summer
- Grey shirt
- Grey tights /socks
- Black footwear

P.E. Uniform:

- Scoil Bhríde P.E. top (available from school)
- Scoil Bhríde t-shirt (available from school)
- Black tracksuit/leggings

N.B Please attach a copy of your child's birth certificate, and also a copy of baptismal certificate if your child will be receiving the Sacraments.

Please note it is the parents/guardians responsibility to inform the school of any changes to information provided on this form.

