



St George's National School
NAUL ROAD
Balbriggan
Co Dublin
K32 KC95

App.No _____
Offer No _____
Received. _____
Place Offered _____
Accepted _____
Refused _____

Enrolment Form

Please fill in using **BLOCK CAPITALS** and complete **ALL** parts. Application must be returned and accompanied by ORIGINAL BIRTH and BAPTISMAL Certificates and PROOF OF ADDRESS

First Name: _____ Family Name: _____

DOB _____ PPS No: _____ Child's Religion: _____

Previous School/Playschool: _____

Last class attended _____ Name of School's Principal _____

Proposed Class _____ Date of Entry: _____

Mother's Name: _____ Mobile(Mother): _____

Mother's Maiden Name _____ No. for TextaParent service _____

Father's Name: _____ Mobile(Father): _____

Address: _____ **Eircode**

Home telephone No. _____ Child minders name and tel no. _____

Emergency contact name & no (other than parents) _____

Name/Age of Siblings _____

Child's Religion:

Church of Ireland (incl. Protestant) Roman Catholic Presbyterian
Methodist, Wesleyan Jewish Muslim (Islamic) Orthodox (Greek,
Coptic, Russian) Apostolic or Pentecostal Hindu Buddhist
Jehovas Witness Lutheran Atheist Baptist Agnostic Other
Religions No Religions **Please provide proof as outlined in enrolment
policy.**

(I consent to this information being uploaded to the primary Online Database)

Ethnic or Cultural Background:

White Irish Irish Traveller Roma Any other White background
Black or Black Irish (African) Black or Black Irish (any other Black background) Asian or Asian Irish (Chinese) Asian or Asian Irish (Any other Asian Background) Other (incl mixed background)

(I consent to this information being uploaded to the primary Online Database)

Language spoken at home _____

Nationality of: Mother _____ Father _____ Child _____

Does your child have special needs (educational, emotional and/or medical)

Yes _____ No _____

Please state needs:

Has your child been assessed for learning, behavioural, psychological reasons?

Yes _____ No _____

Are any Assessment Reports available? Yes _____ No _____

Were additional resources provided in child's previous school? Yes _____ No _____

If yes please give details _____

Has your child any sight/hearing/speech difficulties? _____

Details _____

Does your child have any illness/allergy? _____

Details _____

Is your child on medication? Yes _____ No _____ If yes, for what condition? _____

Does medicine have to be administered during school hours? Yes _____ No _____

If yes the School policy on Administration of Medicines must be consulted

Failure to identify special needs at the time of application may invalidate the said application.

- Do you give permission to take the child straight to hospital in case of serious illness/accident? Yes _____ No _____
- Does any legal order under Family Law exist that the school should know about? Yes _____ No _____
- Do you give consent for the child to have photographs/short video clips taken and published on our school website or other publications that the school authorities deem appropriate? Yes _____ No _____
- In order to help your child's education it may be necessary for the teaching staff of St George's to carry out diagnostic testing with your child. I give permission for any necessary diagnostic test to be performed as required. Yes _____ No _____

Acceptance of a place implies acceptance of the School rules and policies.

I accept the Code of Behaviour for St George's NS Yes _____ No _____

Signature of Parents: _____ Date: _____

_____ Date: _____

Have you attached the Birthcert? Yes _____ No _____

Have you attached a previous school report? Yes _____ No _____

Have you attached any previous assessment reports? Yes _____ No _____

Data Protection Statement

The information collected on this form will be held by St George's NS in manual and in electronic format. The information will be processed in accordance with the Data Protection Act, 1988 and the Data Protection (Amendment) Act, 2003.

The purpose of holding this information is: *for administration, to facilitate the school in meeting the student's educational needs etc.*

Disclosure of any of this information to statutory bodies such as the Department of Education and Science or its agencies will take place only in accordance with legislation or regulatory requirements. Explicit consent will be sought from Parents/Guardians or students aged 18 or over if the school wishes to disclose this information to a third party for any other reason.

PTO →

Parents/Guardians of students and students aged 18 or over have a right to access the personal data held on them by the school and to correct it if necessary.

I consent to the use of the information supplied as described.

Signed Parent/Guardian: _____

The Data Protection/GDPR Policy to view is available on the school website:
www.stgeorgesns.com

This school is under Church of Ireland management. All applications will be notified by post after the applications are processed: normally the Easter prior to the September of entry. The age of the child may be a determining factor.