



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

Timoleague National School

Timoleague, Bandon, Co. Cork, P72Y058

RCN 20204584 / Roll No. 12456M

Enrolment Application Form

Child's Name; _____

*Please ensure you have included a copy of your child's birth
certificate and PPS Number*

Please note completion of this form does not guarantee your child a place in the school. We will input your child's data into the School's Management Information System, Aladdin.



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

Child's Details

First Name; _____ **Surname;** _____

Gender; _____ **PPS Number;** _____

Date of Birth; _____ **Nationality;** _____

Religion; _____ **Eircode;** _____

Address ; _____

Alternate Address; _____

Previous School; _____



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

Do you give consent to discuss the needs of your child with the manager of the preschool? *Yes* *No*

Medical & Allergy Information; _____

Any other relevant information about your child we should know?

Please attach a copy of all assessments relating to your child's development and/or needs.

Mother/Guardian Details

First Name; _____ **Surname;** _____

Email address; _____

Mobile No; _____ **Work No;** _____



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

Father/Guardian Details

First Name; _____ **Surname;** _____

Email address; _____

Mobile No; _____ **Work No;** _____

Emergency Contact No 1

First Name; _____ **Surname;** _____

Description (Childminder, Grandparent etc); _____

Mobile No; _____ **Work No;** _____

Emergency Contact No 2

First Name; _____ **Surname;** _____

Description (Childminder, Grandparent etc); _____

Mobile No; _____ **Work No;** _____



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

In the event of a Medical Emergency/Accident, every effort will be made to contact you. Please authorise by signing below that at their discretion a member of staff may bring my child to a doctor/hospital if an emergency arises.

Signed; _____

Please read the following school policies on our school website (Password TNSCommunity) and sign the permission below accordingly;

___ I consent to my child's participation in the Stay Safe Programme

___ I consent to my child's participation in the RSE Programme

___ Educational Screening Tests are carried out in the school on all children from Infants to 6th class. I allow my child to do these tests

___ During your child's time in Timoleague National School, it may be necessary from time-to-time for teachers to carry out diagnostic testing with your child on an individual basis in order to help them in their educational development. I give permission for any necessary diagnostic tests to be carried out with my child.

___ *Having consulted with the class teacher,* I give permission to allow my child to be supported by the Special Education teacher, if deemed necessary.

___ I give permission to allow my child's photograph/image to be included in school-related activities, competitions, school website, school's social media, school newsletter etc.



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

___ I give permission to allow my family details (name, address, date of birth etc) to be given to agencies such as HSE (school nurse, doctor, dentist)

___ I have read and accepted the Admissions/Enrolment Policy, Code of Behaviour, Anti-Bullying Policy, Child Protection Policy, Acceptable Use and Parent/Staff Communication (available on school website – password TNSCommunity)

Signed; _____

Date; _____

Complete this section if you are applying for your child to transfer from another primary school.

Previous school; _____

School Address; _____

What class is your child in at the moment; _____



**Timoleague
National School**
ANCORA IMPARO

Timoleague,
Bandon,
Co. Cork.
P72Y058
office@timoleaguens.com
www.timoleaguens.com
Roll no. : 12456M

Please note; The principal, on behalf of the Board of Management, will contact the Principal of the school from which it is requested to transfer to Timoleague National School. Parents wishing to transfer will be informed of this policy and of the Principal's intention to discuss all aspects of the pupil's behaviour and academic progress. All information will be treated in strict confidence.

Have you enclosed the most recent school report and attendance record?

Yes No

Signed;

Date;
