

Enrolment Application Form Kildimo National School 2024/25

2/04/2019 Gender: <i>FENALE</i> Address (Date of Birth
resides): 49 BALLY VAREEN, KILDIMO, V99	
and the state of t	Name
class of Sibling(s) currently enrolled: HUGO KENNELLY - SENIO	OF INFANTS
Parish in which the applicant resides	
Parent(s)/Guardian(s) Details:	
Name: ELINA KENNELLY MParent [] Custodian	[] Legal Guardian
Address: AS ABOVE	
	Home
Mobile 085 764 1335 Email. ELI. ELINA @61	YAIL CON W
IVIODITE CONTROL LITTER.	Name:
KEVIN KENNELLY WParent[] Custodian[] L	
XEVIN KENNELLY MParent [] Custodian [] L	
XEVIN KENNELLY MParent [] Custodian [] L	egal Guardian

Completed enrolment applications must be returned to Kildimo National School, Kildimo, Co. Limerick or submitted by email to info@kildimons.ie no later than 3pm on 31st March 2023.



Kildimo National School Enrolment Form

Please use BLOCK CAPITALS
Child's Name: OUNIA KENNELLY Date of Birth 12/04/2019
Nationality 1818H Religious Denomination CATHOLIC
Child's First Language ENELISH
Kildimo NS is a Catholic school and as such it has a Catholic ethos.
Please include a copy of child's Birth Cert and Baptismal Cert(if applicable) with this application.
Child's Address: 49 BALLYVAREEN, KILDINO, V94KVOV
Please note that all correspondence will be sent to child's address above, unless otherwise informed. Please contact the school if you wish both parents/ guardians to receive notification regarding Parent/ Teacher meetings, reports etc. Mother's Name: EUNA KENNELLY. Father's Name: KENNELLY
Address: AS ABOVE Address: AS ABOVE
Occupation: Occupation: OPHTHALHIC SURGEON
Tel No: Home: Tel No: Home.
Work: Work:
Mobile: 085764 1335 Mobile: 085 7321099
Emergency contact name: LINDA KENNECLY number: 086 816 9444
Mobile No: on which you would like to receive text messages from school: 0857641335 E-mail address for corspondence: ELINA @GHAIL. COM
No. of children in family:3 Position in family (e.g. 1st child etc.)2nd child
Names of brothers / sisters in school: HUGO KENNELLY
Has your child been baptised? ** Date & Place of Baptism:
Preschool attended: BUSY KIDS BALLYCUMMIN Tel No: 061 309 487
Other primary schools attended:

Current Class:Tel No. of previous school:
Please include a copy of last school report if moving from another school.
Irish version of child's name (otherwise school will translate):
Name of family doctor: DR. KIEPAN DALY Tel No: 061 451 789
Has your child ever attended: Speech Therapist NO Occupational Therapist NO Psychologist. NO Counselling NO Other (give details)
Does your child have any known allergies?
details:
Does your child have any physical or emotional problems which might affect his/ her ability to learn and/ or to interact with staff and students?
Any other useful information for instance list any problems child has in relation to health, toilet training, buttons, laces etc
Name of person who may be contacted if child is ill, if neither parent is not available: LINDA KENNELLY. Tel No: 086 816 9444
Relationship to child(e.g. grandparent, minder etc.) AUNT
In the case of minor accidents, such as slight cuts and grazes, the cut is normally washed with water. If the accident is serious parents are informed immediately and are asked to collect the child to bring him/her for treatment.
Do you give permission to take child straight to hospital in case of serious illness or accident: yes/ No
On occasion during the school year children may be filmed or photographed for the school website, or their work may be used for our website or as part of any number of projects the school is involved in. Our protocol for all these is that children are never individual named or photographed. However, if you do not wish your child to be photographed please write to the Principal.
Some times the school is requested to pass on names of children and their address to the HSE for immunisation/dental purposes, to secondary schools when children are transferring to second level, to sporting bodies. Do you give the school permission to pass on this information to these bodies? Yes/ No
You will be contacted in due course regarding an information eve for parents, at which you will be issued with an Information Booklet with all relevant information regarding school rules and procedures, books, uniform etc.
I certify that the information I have given in this form is correct.
Signed: Mother: 5 Kennelly Date: 06/10/23 Father: X-1/2 Date: 06/10/23
Father: Date: 06/10/23

Have you attached?:	- Birth Cert
	-Baptismal Cert
	-Any relevant reports/ assessments
Do you give permission	on to pass on your child's details to the HSE, if required: YES
Does any legal order to outline:	under Family Law exist that the school should know about, if yes give brief
the name of any perso	o be made aware of any court order which affects the child's welfare and also on into whose custody the child should NOT be
	no National School Policies are available on the school Website please read them carefully.
Child ProtectionEnrolment Pol	
	se Policy(internet)
If you do not have acc	cess to the internet, please inform the school and we will provide hard copies.
I confirm that I have r those codes and polici	read the above policies and I agree that the pupil enrolled will be subject to ies:
Signed: S. Kennel	lly Parent/ Guardian.
Do you give permission	on for you child to go on school trips under supervision during the school day mming, local historic/ nature walks)? YES
Sometimes journalists first day at school etc.	s visit our school to take pictures of the children (awards, sporting events,) Do you give permission for your child to be photographed for school spers and school related activities?
Kildimo N.S. tel. No.:	061-394500, Fax. No.:061-394500, e-mail address: info@kildimons.ie

Deimhniú Breithe

Arna eisiúint de bhun an Achta um Chlárú Sibhialta 2004



Birth Certificate

Issued in pursuance of the Civil Registration Act 2004

Éire

Ireland

Ainm/Name
Sloinne/Surname
Sloinne/Surname
Shoinne/Surname
Shoinne/Surname
Shoinne/Surname
Shoinne/Surname
Shoinne/Surname
Shoinne/Surname
Friday, 12 April 2019
Female
Innad Breithe/Place of
University Maternity

University Maternity Hospital, Limerick

Am Breithe/ Time of Birth

22:42

Ainm/Name

Surname

Sloinne/Surname

Sloinne Breithe/Birth

Birth

Ke

Sloinnte Roimhe Seo/ Former Surnames Sloinne Breithe Mháthair Tuismitheora / Parents' Mother's Birth Surname

Sli Bheatha/Occupation

Seoladh/Address

Máthair / Mother Elina

Kennelly Chlevinskaja

Grigel

Office Administrator

Knockananlig Castleisland Co. Kerry Ireland Athair / Father

Kevin Patrick Kennelly

Kennelly

Kennedy

Ophthalmic Surgeon

Knockananlig Castleisland Co. Kerry Ireland

Faisnéiseoir A/Informant A

Ainm/Name Sloinne/Surname Căiliocht/Qualification Seoladh/Address Elina Kennelly Mother Knockananlig Castleisland Co. Kerry Ireland

E. Kennelly

Sinithe ag/Signed by

Cláraitheoir/Registrar

Cláraíodh in Oifig an Chláraitheora/Registered in the Registrar's Office

Limistéar Clárúcháin an Phríomh-Chláraitheora / Superintendent Registrar's Registration Area

Contae/County

Dáta an Chlárúcháin nó Athchláraithe (más maidir) / Date of Registration or Re-registration (if applicable) Cláruimhir/Registration Number Jane Ashworth Limerick Limerick Co. Limerick

1 May 2019 12943736

Demhnitear gur thiomsíodh na sonraí seo ó ctárleabhar coinnithe faoi alt 13 den Acht um Chlaro Sibhialta 2004/Certified to be compiled from a register maintained under section 13 of the Civil Registration Act 2004

Eisithe ag/Issued by Jane Ashworth, Registrar Dáta /Date 1 May 2019

Is cion tromchúiseach é an deimhniú seo a athrú nó é a úsáid agus é athraithe / To alter this certificate or to use it as altered is a serious offence

Parish of Kildimo/laddas Kenry	Birth and
Diocese of Limerick	Baptismal
On examination of the Register of Baptisms of the above parish	CERTIFICATE
I certify that according to it Dewn Nabnelle Ken	rnelly
was born on the 12 day of Chine 2019	
and was baptised according to the Rites of the Catholic	
Church on the 26 day of Sandaly 2020	
in the Church of St Solephin Kilduno	63370
by the Rev John Dor harth	II'S
Parents Mennelly	0
Elina CHLEVINSKAJA	40.00
Sponsors Finlar Kennelly	
Linda Kennelly	
Confirmed	
Married	
Given this 29 day of January 2020	
Signed John Danharth 1. 1.	VERITAS

Kildimo National School Medical Questionnaire

PUPIL DETAILS
Surname: KENNELLY First names: Olivia
Date of Birth: 12/04/2019 Year of entry to school: 2024
PARENT CONTACT DETAILS
Mother's Name: ELINA KENNELLY
Home Phone Number:
Mobile: 085 764 1335
Work Phone Number:
Father's Name: KEVIN KENNELLY
Home Phone Number:
Mobile: 0857321099
Work Phone Number:
Please give the names and contact details of two other nominated adults who can be contacted by the school in the event of an emergency, should neither parent be contactable:
Name: LINDA KENNELLY
Home Phone Number:
Mobile: 086 816 9444
Work Phone Number:
Name: MICHAEL KENNELLY
Home Phone Number:
Mobile: 087 686 6952
Work Phone Number:

Does your child heeds to be made	nave any medi e aware of? I	cal condition of so, pleas	n/allergy whi e give details	ch the school
NK)			
Has your child be so, please give de	en prescribed tails and dosa	any medica ge.	tion for this	condition? If
NO				
Has your child eve so, please give det	r been hospita	alised as a	result of this	condition? If
		119		
	No.			
lease give contact ospital consultant.	details of you	ur child's G	P. and any re	elevant
lame: KIERAN	DALY			
ddress: ENNIS A	POAD MEDIC	CAL, ENNIS	RD, LIME	RICK
hone Number: 06	1451 789			

Name:
Address:
Phone Number:
Is there an emergency action plan in place pertaining to your child's condition? Yes \square No \square N/A
If so please give a copy to the school.
In the event of an emergency does the school have your permission to call an ambulance or bring your child by car to the Accident and Emergency Department at Limerick Regional Hospital? Yes No \Box
Please note: In the event that an ambulance is called a member of staff will accompany your child to the A&E Department.
Parents' signatures: S. Kenwelley
K.X.



Dear Parents,

The Department of Education and Skills is developing an electronic database of primary school pupils called the Primary Online Database (POD) which will involve schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database will allow the Department to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting.

In order to assist with the gathering of data, please complete <u>one form</u> for <u>each</u> of your children in CAPITAL LETTERS and return to school .This form will be retained by the primary school.

Please also find attached, a FAQ list to which you can refer, should you have any queries. Yours sincerely, Ciara McNamara **Pupil Information Form** *Pupil Surname: KENNELLY *Pupil Forename: OLIVIA *Birth Cert Surname (if different from above): _________ ABOVE *Pupil Address 49 BALLYVAREEN, KILDIMO*PPSN of Pupil V94KVOV *Mother's Maiden Name CHLEVINSKAJA *Date of Birth 2 12/04/2019 LIMERICK *County IRISH *Nationality ___ Female Male *Gender *Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English?



PLEASE TURN OVER

The Department has consulted with the Data Protection Commissioner in relation to the collection of individual pupil information for the Primary Online Database. Both religion and ethnic and cultural background are considered sensitive personal data categories under Data Protection legislation. Therefore, it is necessary for each pupil's parent/guardian to identify their child's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills. All other information held on POD was deemed by the Data Protection Commissioner as non-sensitive personal data.

*To which ethnic or cultural background group does your child belong (please circle one)?

Irish Traveller White Irish Roma Any other White Background Black African Any other Black Background Other (inc. mixed background) Chinese Any other Asian background No consent *What is your child's religion? (please circle one) Roman Catholic Church of Ireland Presbyterian (incl. Protestant) Muslim(Islamic) Methodist, Wesleyan Jewish Orthodox Apostolic or Pentecostal Hindu (Greek, Coptic, Russian) Jehovah's Witness Lutheran Buddhist Atheist Baptist Agnostic Other Religions No Religion No Consent

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: E. Kennelly K. K. Parent/Guardian

Date: 06/10/23

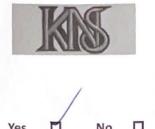
(Categories are taken from the Census of Population)



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The database will hold data on all primary school pupils including their PPSN, First Name, Surname, Name as per Birth Certificate, Mother's Birth Surname, Address (including Eircode), Date of Birth, Gender, Nationality, whether one of the pupil's mother tongues is English or Irish, whether the pupil is in receipt of an Exemption from Irish and if so the reason for same, and whether the pupil is in a Mainstream or Special Class. The database will record the class grouping and standard the pupil is enrolled in. The database will also contain, on an optional basis, information on the pupil's religion and on their ethnic or cultural background. In order to assist with the gathering of data please complete this form in CAPITAL LETTERS and return to the school. The second page of this form will be retained by the primary school.

Teacher/Class	ss Name JUNIOR INFANTS	NFANTS Current Standard	
	Q	Junior Infants Senior Infants First Class	
		Second Class Third Class Fourth Class	
		Fifth Class	
Pupil Forena	me: OLIVIA	Pupil Surname: KENNELLY	
	11 210 6118 PA	Mother's Birth Surname CHLEVINSKATI	
Pupil's Date	of Birth 12/04/2019	Pupil's Gender: Male	
Birth Cert Fo	rename (if different from name above)	Birth Cert Surname (if different from name above)	
Pupil Addres	S 49 BALLY VAREEN, KLLD	IMO	
Eircode		V941KV0V	
	1 10 14		
County	LIMERICK		
	(See https://finder.elrcode.ie/ for Eircode)		
Nationality	IRISH	(In the case of dual citizenship, please specify both nationalities)	
Is one of the	pupil's mother tongues (i.e. la	nguage spoken at home) Irish or English?	





The Department has consulted with the Data Protection Commissioner in relation to the collection of individual pupil information for the Primary Online Database. Both religion and ethnic and cultural background are special category data under the General Data Protection Regulation (GDPR). These questions are optional. While these questions are optional, the information would be very useful to the Department for statistical and research purposes. Aggregated information on Ethnic/Cultural background will be used to track the progress of these groups, and to compare their progress with other groups, thereby identifying gaps in the system and assisting in the development and implementation of appropriate policies and interventions. Aggregated information on religion will be used for statistical purposes only. Parents/guardians are asked, if they wish to do so, to identify their children's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills. This page of the form will be retained by your primary school.

To which ethnic or cultural background group does your child belong (please tick one)? (Categories based on the Census of Population) White Irish Irish Traveller Roma Any other White Background Black or Black Irish - African Asian or Asian Irish - Chinese Black or Black Irish - Any other Black Background Other (inc. mixed background) Asian or Asian Irish - Any other Asian background No consent What is your child's religion? Church of Ireland (Anglican) Presbyterian Roman Catholic Muslim (Islamic) Methodist, Wesleyan Jewish Hindu Orthodox (Greek, Coptic, Russian) Apostolic or Pentecostal Lutheran Jehovah's Witness Buddhist П Baptist Agnostic Atheist Christian Religion (not further defined) Protestant Evangelical No Religion No Consent Other Religions I consent for the special category in the two questions above 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. Parent/Guardian Please complete this form and return to your primary school. For further information on POD please go to the Department of Education and Skills' website www.education.ie