|  |  |
| --- | --- |
| **Name of child on birth certificate:** **(Please attach an original birth certificate- this will be photocopied and returned)** |  |
| **Date of Birth:**  |  |
| **PPS No:** |  |
| **Nationality of child:** |  |
| **If not born in Ireland, date of arrival:** |  |
| **Religion:** |  |
| **Address:** |  |
| **Previous School Name and Address:****(if not transferring from OLV Infants)** |  |

|  |  |
| --- | --- |
| **Mother’s Name:** |  |
| **Are you a legal guardian of the child?** |  |
| **Nationality:** |  |
| **Address (if different from pupil’s)** |  |
| **Occupation:** |  |
| **Mobile Phone Number:** |  |
| **Work/Home Phone Number:** |  |
| **Email address: (please print)** |  |

|  |  |
| --- | --- |
| **Father’s Name:** |  |
| **Are you a legal guardian of the child?** |  |
| **Nationality:** |  |
| **Address (if different from pupil’s)** |  |
| **Occupation:** |  |
| **Mobile Phone Number:** |  |
| **Work/Home Phone Number:** |  |
| **Email address: (please print)** |  |

**Name of brothers/sisters attending OLV Schools (if applicable):**

|  |  |
| --- | --- |
| **Name:** |  |
| **Current Class/Teacher:** |  |
| **Name:** |  |
| **Current Class/Teacher:** |  |

## CONTACT NUMBERS

Alternative Contact Numbers if you cannot be reached (please indicate if this person is a relation, childminder, family friend etc.). Please inform the office immediately if these numbers change.

|  |  |  |
| --- | --- | --- |
| Name | Phone Number | Relationship to child |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

In the event of an emergency, should we fail to contact you, do you give permission to the School to bring your child to doctor/hospital? **Please Circle Yes No**

|  |  |
| --- | --- |
| Family Doctor: |  |
| Phone Number: |  |
| Address: |  |

|  |  |  |
| --- | --- | --- |
| **Please read each statement clearly and indicate your consent/agreement by ticking Yes/No** | **Yes** | **No** |
| From time to time your daughter may receive Support Teaching, which may be on an individual or group basis. These classes may be designed to support language development, literacy or mathematical needs, social skill training or gross and fine motor skill development. Please tick the consent box if you are happy for your daughter to participate in the above support initiatives if deemed necessary. |  |  |
| I/We consent to the administration of all relevant screening tests to the above-named daughter.  |  |  |
| I/We accept that while in school my daughter may occasionally be photographed/ videoed, incidentally or otherwise. |  |  |
| I/We consent to the use of the above material and/or samples of pupil’s work, for display/promotion/publicity purposes and on the school website. (The Board of Management cannot be held responsible for pictures/videos taken by parents at school celebrations, concerts etc.) |  |  |
| I/We further undertake that my daughter will comply fully with all school Rules and Regulations as outlined to pupils for the duration of her enrolment in this school.  |  |  |
| I/We give my/our consent to my daughter to be taken out during the school year on organised and supervised school activities. Examples of such activities may include school tours (educational and leisure), workshops, exhibitions and/or sporting outings.  |  |  |
| I/We give my/our consent for my daughter to attend Catholic ceremonies/celebrations in OLV Church. |  |  |
| I/We confirm that I/we have read the school’s Code of Behaviour on the school website. I/We agree that the pupil enrolled herewith will be subject to these codes and policies.  |  |  |
| I/We understand that participation in the Stay Safe Programme and RSE are compulsory and accept my daughter's participation in the Stay Safe and RSE Programmes. |  |  |

|  |
| --- |
| **The statements below must be agreed to upon enrolment. Please tick box beside each statement to confirm agreement with the following statements.** |
| I/We have read the Internet Acceptable Use Policy on the website and grant permission for my daughter to access the internet. I understand that school internet usage is for education purposes only and that every reasonable precaution will be taken by the school to provide for online safety. I/We accept my own responsibility for the education of my daughter on issues of Internet Responsibility and Safety. I/We understand that having adhered to all the enclosed precautions; the school cannot be held responsible if my daughter tries to access unsuitable material. |  |
| I/We have read and am aware of the Data Protection Policy and the Data Audit on the school website. |  |

Parent/Guardian Signature 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **CHILD PROFILE (For school records only)**

**Family:**

Placing of child in family (1st, 2nd etc.): \_\_\_\_\_

With whom does the child normally reside? Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If there is any legal documentation in regard to guardianship of the child, please ensure you discuss this with the school principal.**

**Medical/Educational**

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Speech difficulties |  |  |
| Hearing difficulties |  |  |
| Sight difficulties |  |  |
| Asthma |  |  |
| Epilepsy |  |  |
| Diabetes |  |  |
| Allergies |  |  |
| Emotional Difficulties |  |  |
| Behavioural Difficulties |  |  |
| Diagnosed SEN |  |  |
| Other |  |  |

If you ticked yes to any of the above, please give details below and submit any medical/psychological reports that are available to the school.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has there been any major trauma in your daughter's life that the school should be aware of? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any general concerns around your daughter in terms of education, behavioural or emotional issues?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_