

Catherine McAuley Junior School/Bunscoil Nic Amhlaidh, Castlemoyle, New Ross, Co. Wexford.

Application for Admission Form 2023/24

| Child's Name (as on birth cer | rtificate): | | |
|---|------------------|--|--|
| Name the child is known by (| if different fro | om birth certificate): | |
| PPSN: | Nationality: _ | Religion: | |
| Ethnic Background: | | _Is English or Irish spoken at home? YES/NO | |
| Date of Birth: | Gende | er: | |
| Address: | | | |
| | | Eircode: | |
| Name of Playschool: | | | |
| Friends coming to this school | : | | |
| ❖ Parent/Guardian 1: | | | |
| Address (if different to pupil) | : | | |
| | | Birth Surname (If applicable): | |
| Email Address: | Mobile No.: | | |
| ❖ Parent/Guardian 2: | | | |
| Address (if different to pupil) | : | | |
| | | Birth Surname (If applicable): | |
| Email Address: | | Mobile No.: | |
| Status of Parents' Relations | hip: | | |
| Does any court order/custody know about? (Yes or No): principal to discuss further. | arrangement o | exist under family law that the school should f Yes, please make contact with the school | |
| Other Adults authorised to co | ollect child fro | om school/Emergency Contacts: | |
| Name: | P | hone No | |
| Relationship to child: | | | |
| Name: | P | hone No | |
| 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? (Yes or No): |
|---|
| Name & Address of Family GP: |
| Phone No.: |
| Medical History/Conditions/Diagnosis we should know about (please circle): |
| Asthma Epilepsy Diabetes Food Allergy Other Allergies Visual Impairment Hearing Impairment Physical disability ASD Speech/language difficulty Other |
| Further information please: |
| Has your child been referred to any of the following (please circle)? |
| Children's Disability Network Team Speech therapy Assessment of Network Team Occupational Therapy Psychological Assessment Social Worker/Tust Other |
| Further information please: |
| Are there any special arrangements you feel would be necessary for your child at school? |
| Are there any other issues relating to your child that the school should know about? (e.g. family issues, emotional, physical, social, behavioural issues). |
| Have you enrolled your child in another school? YES/NO |
| Name of school: |
| Pupil Transfer (If transferring from another school, please fill in this section) |
| Previous School Name and Address: |
| Phone No.: Principal's Name: |
| Reason for transfer: |

Please note that we may need to contact this school to get relevant educational information.

School Policies/Procedures Checklist:

- We have read and agree to accept the policies and procedures put in place by the Board of Management of Catherine McAuley Junior School (all policies are available to view on the school website or in hard copy if requested).
- We understand that some of the above information will be shared with the Department of Education & Skills on their Primary Online Database.
- We understand that Catherine McAuley Junior School uses Aladdin Connect software as a communication platform and that we agree to engage with the Aladdin app on our personal phone/device in order to gain access to all school information, to make relevant school payments and to give consent for school activities.
- We understand that Catherine McAuley Junior School implements and teaches the RSE (Relationships & Sexuality) and Stay Safe Programmes as per Department of Education & Skills directive.
- We give permission for staff to administer basic first aid to our child in the event of a minor accident.
- We give consent for our child to be photographed/videoed in school for educational purposes and to have these photographs/videos placed on the school website/twitter page and local newspapers (Please write NO on the line if you do not give consent):
- We are aware that it is incumbent on the school to inform HSE/Tusla authority in the event of a disclosure/concern regarding any form of child abuse. This is a legal requirement under the Children first Child Protection Procedures.
- We have included a copy of our child's birth certificate with this form. We agree to inform the school in the event of any future legal changes to the guardianship/custody arrangements concerning our child.
- We agree to inform the school as soon as is practicable in the event of any changes to contact details for parents and emergency contacts.

| Signed: | Mother | Date: |
|---------|--------|-------|
| | | |
| Signed: | Father | Date: |