

## ADMISSION POLICY

Application forms for admission to the school are available from the **First Friday in October** of the year preceding the child's entry to school. These forms must be returned to the school **within 3 weeks** of that date. Any applications received after this date may not be processed.

Application forms may be downloaded from the school website or are available from the school office.

Information about applications will be available on the school website, the Parish Newsletter, local Playgroups and School Newsletters.

All applications must be submitted in hard copy.

Applicants will be notified of a decision **before the end of the 1st school term.**

The School's Enrolment Policy is available on the website.

\* **Reminder** Please ensure all sections of the form are completed clearly

## PARENTAL CONSENT

### Medical Emergencies

During the course of the school day children can have little accidents and cut or bump themselves. I give permission for my child to receive any medical attention deemed necessary and to be taken to hospital in case of serious illness or accident. (We will always try to contact parents first.) Yes  No

### School Website/Publications

I give consent for the use of school related photographic images which include my son/daughter on the school website or in other school publications or displays. I understand that s/he will not be identified individually. Yes  No

### Activities Outside/After School

During the school year classes may undertake activities outside the school premises e.g. visiting the local library, park etc. I consent that my child may do so. Yes  No

### Competitions

I give consent to allow my child to enter school competitions and for their name and date of birth to be shared with the organisers. Yes  No

### D.T. (Digital Technology)

I give consent for my child to use the computers in the school in line with the school's Acceptable Use Policy and for children to use EPortfolios to store their work such as Edmodo, Classdojo and Seesaw.

Yes  No

Parent's/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*'Mol an Óige agus tiocfaidh sí'*  
Praise the young and they will blossom

Tel: 4521369 Fax: 4137601

Email: [holyrosaryps1@gmail.com](mailto:holyrosaryps1@gmail.com)

Web: [www.holyrosaryps.com](http://www.holyrosaryps.com)

Príomh Oide: Dolores Kelly



*Mission Statement Recognising and embracing the diversity within the community  
we are committed to developing the individual pupil in a secure and challenging learning environment."*

## CHILD'S INFORMATION

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

P.P.S: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_

Boy

Girl

Nationality: \_\_\_\_\_

Relevant Health/Medical Information;  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mothers Maiden Name: \_\_\_\_\_

What is the language spoken at home? \_\_\_\_\_

Have you children already attending this school? Yes  No

Have you younger children to enrol in the future? Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

## PARENTAL INFORMATION

Mothers Name: \_\_\_\_\_ Fathers Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_  
(If different from above) (If different from above)

Mobile No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Home No: \_\_\_\_\_ Home No: \_\_\_\_\_

Work No: \_\_\_\_\_ Work No: \_\_\_\_\_

Email : \_\_\_\_\_ Email: \_\_\_\_\_

Contact in Case of Emergency (in the event parent can't be contacted):

Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

## PRESCHOOL

Has your child attended preschool? Yes  No

If yes state name and address of preschool \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## To which ethnic or cultural background group does your child belong?

Please tick one

(Categories are taken from the Census of Population)

White Irish  Irish Traveller  Roma

Any other White Background  Black African

Any other Black Background  Chinese

Any other Asian Background  Other (incl. mixed Background)

I do not consent to provide the above information

## What is your child's religion?

Roman Catholic  Church of Ireland (incl. Protestant)  Presbyterian

Methodist, Wesleyan  Jewish  Muslim (Islamic)

Orthodox (Greek, Coptic, Russian)  Apostolic or Pentecostal  Hindu

Buddhist  Jehovah's Witness  Lutheran  Atheist

Baptist  Agnostic  Other Religion

I do not consent to provide the above information

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

Parent/Guardian/Student

For further information on POD please go to the Department of Education and Skills' website [www.education.ie](http://www.education.ie)

## THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS FORM

Birth Certificate  Please tick  
Proof of current residence (e.g. recent ESB, Gas Bill)  documents  
Baptismal Cert (if Roman Catholic)  supplied

## DECLARATION

I WISH TO ENROL MY SON/DAUGHTER AS A PUPIL OF Holy Rosary Primary School. If my child is accepted for entry, I hereby undertake for myself and for him/her to observe the rules and regulations of the school as outlined in the Policies and Procedures Booklet which I have read.

Parent's/Guardian's Signatures \_\_\_\_\_ Date \_\_\_\_\_