

# Caragh National School



Registration form for year: \_\_\_\_\_

Please complete in **BLOCK CAPITALS**

Reg No: \_\_\_\_\_ (office use)

<b>Pupil's First Name:</b>	<b>Mothers maiden surname:</b>
<b>Pupil's Surname:</b>	<b>PPS No:</b>
<b>Date of Birth:</b>	<b>CLASS:</b>
<b>Male/Female</b>	<b>Country of Birth:</b>
<b>Address:</b>	<b>Nationality:</b>
	<b>If born outside the country, year of arrival in Ireland:</b>
<b>Eircode:</b>	<b>Languages spoken in the home:</b>
<b>Parent/Guardian Details</b>	<b>Parent/Guardian Details</b>
<b>First Name:</b>	<b>First Name:</b>
<b>Last Name:</b>	<b>Last Name:</b>
<b>Relationship to child:</b>	<b>Relationship to child:</b>
<b>Phone No (Home):</b>	<b>Phone No (Home):</b>
<b>Phone No (Work):</b>	<b>Phone No (Work):</b>
<b>Phone No (Mobile):</b>	<b>Phone No (Mobile):</b>
<b>email Address:</b>	<b>email Address:</b>
<b>Occupation:</b>	<b>Occupation:</b>

**Names of brothers/sisters in this school:**

**It is school policy to pass on the above information excepting Religion and Ethnicity to the Department of Education and Skills.**

Please tick	Yes	No
Are there any orders or other arrangements in place governing access to or custody of your child?		

The school may share Personal Pupil Data with other organisations such as HSE, Tusla, An Garda Síochána, etc where there is a legal basis for doing so under GDPR.

Name of Previous School/Pre-school:

Address:

Principal's Name:

Phone No:

Additional local contact names, to be contacted in emergencies [Not the same as above]

Name:

Phone No(mobile):

Relationship to child:

Phone No (Home):

Name:

Phone No (mobile) :

Relationship to child:

Phone No (Home):

Name:

Phone No (mobile):

Relationship to child:

Phone No (Home):

### SCHOOL USE ONLY

If the language spoken at home is **NOT** English, an Appointment with our E.A.L. (English as Another Language) teacher is required.

Date of Appointment: \_\_\_\_\_ Time: \_\_\_\_\_

Teacher: \_\_\_\_\_

**Relevant Medical Information:**

**Family Doctor:**

**Phone No:**

**Any medical concern/information of relevance? (use a separate sheet, if required)**

**Has your child any Special Educational Needs?**

**Details:**

**Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English?**

Yes  No

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 sensitive personal data categories under Data Protection legislation. 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. Enhanced capitation in respect of pupils who are members of the Traveller Community will be paid to schools on the basis of the answers to this question. 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 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	<input type="checkbox"/>	Irish Traveller	<input type="checkbox"/>	Roma	<input type="checkbox"/>
Any other White Background	<input type="checkbox"/>			Black or Black Irish - African	<input type="checkbox"/>
Black or Black Irish - Any other Black Background	<input type="checkbox"/>			Asian or Asian Irish – Chinese	<input type="checkbox"/>
Asian or Asian Irish - Any other Asian background	<input type="checkbox"/>			Other (inc. mixed background)	<input type="checkbox"/>
No consent	<input type="checkbox"/>				

**What is your child's religion?**

Roman Catholic	<input type="checkbox"/>	Church of Ireland (Anglican)	<input type="checkbox"/>	Presbyterian	<input type="checkbox"/>
Methodist, Wesleyan	<input type="checkbox"/>	Jewish	<input type="checkbox"/>	Muslim (Islamic)	<input type="checkbox"/>
Orthodox (Greek, Coptic, Russian)	<input type="checkbox"/>	Apostolic or Pentecostal	<input type="checkbox"/>	Hindu	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>	Jehovah's Witness	<input type="checkbox"/>	Lutheran	<input type="checkbox"/>
Atheist	<input type="checkbox"/>	Baptist	<input type="checkbox"/>	Agnostic	<input type="checkbox"/>
Christian Religion (not further defined)	<input type="checkbox"/>	Protestant	<input type="checkbox"/>	Evangelical	<input type="checkbox"/>
Other Religions	<input type="checkbox"/>	No Religion	<input type="checkbox"/>	No Consent	<input type="checkbox"/>

**Please attach a copy of Birth Certificate**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Date received:** \_\_\_\_\_ **Office use**

# Caragh National School

## Consent Form

**We would like your permission for the following in relation to your child**

*Please tick the appropriate box and sign - Both parents/guardians please sign below*

<b>Please Tick</b>	<b>Yes</b>	<b>No</b>
<b>Activities Outside/After School</b>		
During the school year classes may undertake activities outside the school premises e.g. visiting the church, library, school tours. I/We consent that my child may do so.		
<b>D.T. (Digital Technology)</b>		
I/We give consent for my child to use the I.T, equipment in the school in line with our Acceptable Use Policy.		
<b>School Website/Publications:</b> I/We give consent for the use of school related photographic images which include my son/daughter on the school website, school facebook page or in other school publications or displays. I/We understand that s/he will not be identified individually.		
<b>Dept of Education &amp; Skills</b>		
I/We give written parental consent to share Ethnic or Cultural Background and Religion with the Department of Education & Skills.		
<b>Medical Emergencies</b>		
I/We 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.		
<b>School Policies</b>		
I/We have received and read a copy of Caragh National School Code of Behaviour and agree that my child and I/We will abide by it.		
I/We agree to familiarise myself with all school policies, agree to abide by them and agree to discuss them at an appropriate level with my child.		
<b>Competitions</b>		
I/We give consent to allow my child to enter school competitions and for their name and date of birth to be shared with the organisers.		

**Child's Name:** \_\_\_\_\_

**I/we wish to enrol my/our child in Caragh National School**

**I/we have received and read a copy of Caragh National School Policy**

**Signed:**

**Parent/Guardian Date:**

**Signed:**

**Parent/Guardian Date:**

**Both Parents/Guardians to sign**

