



# St. Patrick's National School

Collon Road, Slane, Co. Meath  
T: 041-982 4229 F: 041-982 4229  
W: www.slanens.ie E: office@slanens.ie



Office Use Only

## Application Form for Enrolment

Form 25:11:08

We will require a copy of both your child's Birth Certificate and Baptismal Certificate  
( a Baptismal Certificate will not be needed if he/she was baptised in Slane Parish)

Child's First Name: \_\_\_\_\_

Child's Family Name: \_\_\_\_\_

Year of enrolment: **20**\_\_\_\_\_  
The year you intend to start

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
dd/mm/yyyy e.g 31/12/1998

Gender: Male-  
Female-

PPS No: \_\_\_\_\_  
(From Children's Allowance book)

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

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

Where Baptised: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

With whom does the child normally live: Both Parents- Mother- Father- Other (please specify) \_\_\_\_\_

No. of children in the family: \_\_\_\_\_ Name of siblings in school (if any): \_\_\_\_\_

## Contact Details

In the event that your child becomes ill during school time, we will contact Parent No. 1 first, then No. 2 and then the Emergency Carer: therefore, please provide the name of a childminder/relative/friend who can be contacted in the event that we are unable to contact the parent(s)/guardian(s). IT IS VITAL THAT WE ARE ABLE TO CONTACT YOU SHOULD YOUR CHILD BE TAKEN ILL, SO PLEASE ENSURE THAT YOU KEEP THE SCHOOL INFORMED OF ANY CHANGES OF DETAILS.

Parent No. 1:

Parent No. 2:

Emergency Contact:

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

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

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

Relationship (e.g. Mother, Father, etc.): \_\_\_\_\_

Relationship (e.g. Mother, Father, etc.): \_\_\_\_\_

Relationship (e.g. Mother, Father, etc.): \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Mobile: \_\_\_\_\_

Mobile: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Are there any court orders in place regarding your child? No- Yes- (If yes, please contact the school with the details)

## School Transport

The Department of Education provide free bus transport to school for some children. The scheme is administered by Bus Eireann. In order to qualify for school transport, a child must be aged between 4 and 12 and living more than 3.2 kilometres (2 miles) from the nearest suitable national school: the Department of Education and Science decides what that nearest suitable school is. Parents or guardians should note that the scheme is not a door-to-door service: parents are responsible for bringing their children to the nearest pick-up point to avail of the service.

Will your child be requiring school transport? No- Yes-

## Medical & Developmental Details

In order to give the best possible service and ensure every attention for the benefit of your child's progress and education, please list any problems he/she may have in relation to health (allergies, epilepsy, asthma, sight, hearing, speech, fainting, etc.), toilet training, soother/pacifier use, etc.. Please give details:

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Has your child ever been referred to any of the following: Speech Therapist, Eye/Ear Specialist, Child Guidance Clinic, or Psychological Services? Please give details:

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## Educational Details

For children starting school, please give details below of any Nursery/Playschool/Montessori, etc. attended:

Nursery/Playschool attended: \_\_\_\_\_

From (date): \_\_\_/\_\_\_/\_\_\_\_\_

dd/mm/yyyy e.g 31/12/1998

For children transferring from another school, please give details below of previous school attended:

Name of School: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates attended

from: \_\_\_/\_\_\_/\_\_\_\_\_

dd/mm/yyyy e.g 31/12/1998

to \_\_\_/\_\_\_/\_\_\_\_\_

Current class: \_\_\_\_\_

• Please inform your child's previous school that we require a letter from them under the Education Welfare Act 2000 concerning your child's attendance.

• We will also need your child's educational progress report from the previous school.

Reason for transfer: \_\_\_\_\_

## Consent Details

During the course of the school year, all classes will normally undertake a variety of different activities outside the school premises e.g. visit the church; swimming; football matches; rounders; basketball; athletics, school tours; history/educational tours (Mellifont Abbey, Slane Hill, library visits, etc.), and any other activities that arise. When we take the children on these outings, we increase the level of supervision to meet the needs of the particular activity.

- We are seeking your consent for all these different activities which arise during the school year.

Permission granted-

Permission withheld -

Computers and internet access in all classrooms give the pupils a very powerful tool for learning. The school has a very comprehensive Acceptable Usage Policy for the use of these tools, and we are asking you to grant consent for your child to use the computers in the school in accordance with those guidelines. Children will also have the opportunity to see their work (essays, paintings, poems, etc.) published on the school website. When work is chosen, the children are never individually identified.

- We are seeking your consent for your child to access the internet, and for any work to be published, in line with our policies.

Permission granted-

Permission withheld -

From time to time, we publish photos of students, either in local newspapers or on the school website, engaged in school related activities. This is usually done to publicise various school activities (fund-raising, sports days, Christmas performances, etc.). Again, the children are never individually identified.

- We are seeking your permission to publish photos of your child, should the occasion arise

Permission granted-

Permission withheld -

I/We have read, and understood, the school's Code of Conduct and Acceptable Usage Policy( which are attached, or are available online at the school website, [www.slanens.ie](http://www.slanens.ie)) and will ensure that my/our child, named overleaf, will abide by them.

I/We confirm that all the above details are correct.

Signed: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_