

Scoil Íosagáin Upperchurch



Each person through positive learning experiences will be stimulated to achieve his/her full potential, face life confidently, find fulfilment and be respectful in an ever-changing world.

APPLICATION FOR ADMISSION 2019- 2020

Any information given on this form will be treated with the strictest confidence and only used for the benefit of your child. **CLOSING DATE: Thursday February 28th 2019**

The Department of Education and Skills has developed an electronic database of primary school pupils called the Primary Online Database (POD) which involves schools maintaining and returning data on pupils to the Dept at individual pupil level on a live system. This information will be used to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting. The database will hold data on all primary school pupils. The database will also contain, **on an optional basis**, information on the pupil's religion and on their ethnic or cultural background. The data required for POD is marked with an **asterisk*** and will only be uploaded to POD if **your child is enrolled**. All other data we need for the efficient running of the school. **In order to assist with the gathering of data please complete the form in CAPITAL LETTERS and return to the school. This form will be retained by the school.**

Student Information

*Pupil First Name: _____ *Pupil Surname _____

*Pupil First Name: _____ *Pupil Surname: _____
In Irish (if known) In Irish (if known)

* Pupil address: _____

*Date of Birth: _____ Please attach original birth certificate (will be returned)

*PPS No.: _____ Place of Baptism (if applicable): _____

*Gender: _____ *Nationality: _____ *Religion: _____

Do you consent to uploading data relating to religion on POD?

Yes No

*Ethnicity/Nationality? _____

Do you consent to uploading data relating to ethnicity on POD?

Yes No

Name and address of pre-school or previous school attended: _____

Name and class of siblings already in the school: _____

Chairperson: P.J. Harrington
Principal: Alma Quinn, B.Ed.
Deputy Principal: Mary Corcoran, B.Ed.



Scoil Íosagáin Upperchurch N.S
Upperchurch
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RCN 20135386
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Number of Children in the Family: _____

(a) **PARENTS/GUARDIANS:** The following information is needed for registration purposes.

Name: _____

Name: _____

Occupation: _____

Occupation: _____

Nationality: _____

Nationality: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Mobile Phone: _____

Mobile Phone: _____

Address: _____

Address: _____

Eircode: _____

Eircode: _____

Mobile No. to be used by School for "Text a Parent" service: _____

Distance in kilometres from School: _____

Alternative Contacts

1st contact person if parent not available: Name: _____

Phone No: _____

Relationship to Child: _____

2nd contact person if parent not available: Name: _____

Phone No: _____

Relationship to Child: _____

In the case of none of the above being contactable, do we have permission to take your child to the Doctor or Hospital in case of a serious illness/accident/emergency.

Yes

No

Name of persons who have permission to collect your child after school:

(Please note that for any arrangements other than the above, a note signed by you must be provided on the day)

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Medical Information

Name and phone no. of Family Doctor: _____

Has your child ever been referred to a specialist by your doctor?

 Yes No

If yes please give brief details of referral: _____

Please give details of any medical conditions of which the school should be aware (eg. Asthma, Epilepsy, Diabetes etc...)

Has your child any allergies:

 Yes No

If yes please give details: _____

Has your child ever attended:

Educational/Clinical
Psychologist:

 Yes No

Speech/Language
Therapist:

 Yes No

Occupational Therapist

 Yes No

Have any professional assessments/reports/recommendations been furnished on your child in any of the following areas:

Hearing:

 Yes No

Eyesight:

 Yes No

Speech/Language:

 Yes No

Psychological Report:

 Yes No

Occupational Therapy Report:

 Yes No

If you have answered yes to any/all of the above please give details:

**PLEASE ATTACH A COPY OF ALL ASSESSMENTS, PROFESSIONAL REPORTS OR RECOMMENDATIONS
REGARDING THE ABOVE INFORMATION**

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- Do you give permission for the Class Teacher/Member of the Support Team, to administer school-based tests/assessments/diagnostic tests to your child in order to monitor their progress and cater for their needs?

Yes	No
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- Sometimes photographers visit our school to take pictures of the children e.g. awards/prizes, sporting events, first day at school etc. Do you give permission for your child to be photographed by photographers/school staff, for school projects, local newspapers, school bulletin and school related activities?

(See School's Photography Policy on website www.upperchurchns.ie for further information)

Yes	No
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- Do you give permission to Scoil Íosagáin to use photographic images of your child for display in Church during preparation for First Holy Communion and Confirmation and/or in any other relevant publications eg. Local press, the school bulletin etc.

Yes	No
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- Do you give permission for video clips involving your child in groups/with their class to be used on the school website? (Children will not be named individually)

Yes	No
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- Do you give permission for your child's photo to be used on the school website? (Children will not be named individually) (See School's Photography Policy on website www.upperchurchns.ie for further information)

Yes	No
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The Board of Management cannot be held responsible for pictures/videos taken by parents during school events.

- Do you give permission for your child to take part in the Stay Safe Child Protection Education Programme? (for more information - http://www.staysafe.ie/parent_guide.htm)

Yes	No
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- Do you give permission for your child to take part in the R.S.E (Relationships and Sexuality Education) Programme? (See information sheet enclosed)

Yes	No
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- If a toileting accident occurs, do you give permission to staff members of Scoil Íosagáin to assist your child?

Yes	No
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- Do we have permission to administer minor First Aid ie. Dress/Treat superficial wounds?

Yes	No
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- When taking part in school activities, do you give permission to staff members of Scoil Íosagáin to assist your child should they need help changing their clothes in Communal areas such as GAA dressing rooms, the hall, swimming pool changing areas etc...?

Yes	No
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- Does any Court Order relevant to the custody/guardianship of the child exist?

Yes	No
-----	----

If yes please give details: _____



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While the information provided will generally be treated as private to Upperchurch N.S and will be collected and used in compliance with the Data Protection Acts 1988, 2003 and GDPR 2018, from time to time it may be necessary for us to transfer your personal data on a private basis to other bodies (including the Department of Education & Skills, the Department of Social protection, the Health Service Executive, Tusla (CFA), Social Workers or Medical Practitioners, the National Educational Welfare Board, the National Council for Special Education, the Special Education Needs Organiser, CAMHS (Child and Adolescent Mental Health Services), the National Educational Psychological Service, or (where the student is transferring) to another school). We rely on parents/guardians and students to provide us with accurate and complete information and to update us in relation to any change in the information provided. Should you wish to update or access your/your child's personal data, you should write to the school principal requesting same. Please refer to the school's Data Protection Privacy Statement on the school website for information on Data Protection.

Children enrolled in Scoil Íosagáin are required to co-operate with and support the school's Code of Behaviour as well as all other policies. Parents/Guardians are responsible for ensuring that their child(ren) co-operate with these policies in an age appropriate way.

The information I have given in this form is accurate.

Yes

No

We will co-operate with the School Staff, School Policies on Curriculum, Organisation & Management, School Procedures and support the ethos of the school.

Parent/s signature: _____

Date: _____

IF ANY OF THE DETAILS IN THIS FORM CHANGE - FOR EXAMPLE, ADDRESS, PHONE NUMBERS, ALTERNATIVE CONTACT DETAILS ETC. PLEASE INFORM THE SCHOOL AT THE EARLIEST OPPORTUNITY.

PLEASE DON'T FORGET TO ATTACH A COPY OF ALL ASSESSMENTS RELATING TO YOUR CHILD'S DEVELOPMENT AND/OR NEEDS AND AN ORIGINAL BIRTH CERTIFICATE

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