

DRIMNAGH CASTLE



SECONDARY SCHOOL APPLICATION FORM

NAME: _____

YEAR COMMENCING: _____

FOR OFFICE USE: BIRTH CERTIFICATE

PPOD: _____ **VSWARE:** _____

Note: The information provided on this form is confidential and will be retained, used and disclosed by Meánscoil Iognáid Rís, Drimnagh Castle CBS and centrally in line with the Data Protection Notice in Part 4.

Please complete ALL parts of this form and return with a copy of your son's Birth Certificate.

Part 1 Family Details (Required for school enrolment and parental contact purposes)

1. Child's First Name/s				2. Child's Surname													
3. Child's PPS NO. (If you do not know your child's PPS No, you should be able to get it from your Social Welfare Local Office, or by phone from 01 7043281.) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				4. Date of Birth (attach copy of birth cert) <table border="1"> <tr> <td>D</td><td>D</td><td>--</td><td>M</td><td>M</td><td>--</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>				D	D	--	M	M	--	Y	Y	Y	Y
D	D	--	M	M	--	Y	Y	Y	Y								
5. No. of children in family		<input type="text"/>		6. Position of child in family		<input type="text"/>											
7. Country of Birth Nationality <hr/> If your son was born abroad, at what age did he come to Ireland?				8. Home Address EIRCODE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>													

1. <u>Mother/Guardian Details</u>		2. <u>Father/Guardian Details</u>	
First Name		First Name	
Last Name		Last Name	
Maiden Name			
Relationship to Child		Relationship to Child	
Address		Address (if different)	
Phone No. (Home)		Phone No. (Home)	
Phone No. (Work)		Phone No. (Work)	
Phone No. (Mobile)		Phone No. (Mobile)	
Email Address		Email Address	
Occupation		Occupation	

Emergency Name and Contact Number

Name _____ Phone No. _____

Relationship to Child _____

If there are any orders or other arrangements in place governing access to, or custody of the child, please provide details.

Please indicate name and address of person (s) to whom correspondence is to be sent regarding educational progress of the student if, different from above.

Does the student have any brothers in this school at present or who attended this school in the past?

Yes No

If yes please indicate names and the year they are currently in

Name _____ Year _____

Name _____ Year _____

Name _____ Year _____

Part 2 Primary/Previous School Details (Note: We may contact the school in connection with your child's enrolment)

Name of Primary/Previous School _____

If one of the following please tick:

- | | | |
|--------------------------|--------------------------------|-----------------|
| <input type="checkbox"/> | Drimnagh Castle Primary School | Roll No: 19837N |
| <input type="checkbox"/> | Scoil Mhuire gan Smal | Roll No: 17083B |
| <input type="checkbox"/> | Our Lady of Wayside | Roll No: 19764M |

Primary/Previous School Roll No: _____ (You can find the Primary School's Roll No on your child's School Journal, or on letters from the school, or ask the school to tell you - Roll No's look like "12345A" – i.e. five numerals followed by a single letter)

Consent

I/we give permission to contact my child's primary school and to obtain copies of academic records, psychological reports and other records necessary for my child's educational welfare and for aiding his transition to post-primary.

Signed _____
(Parent/Guardian) (Parent/Guardian)

Date _____

Part 3 Educational Details *(Required for the assessment of individual educational needs)*

Has the student any Specialist Reports?
(e.g. Psychological/Speech & Language) Yes No

Is the specialist report available? Yes No
(If yes please attach copy to Application Form)

Has the student been granted Resource Teaching Hours and/or Special Needs Assistance hours
by the NCSE? Yes No

If you answered yes please give details

Category of Special Need _____

Has the student been in receipt of learning support? Yes No

If the answer is yes please give details _____

Has the student received EAL (*English as an Additional Language*) support? Yes No

If Yes how many years? _____

If student is a non-national please state how many years he has been resident in Ireland _____

Part 4 Medical Details *(Required to ensure the school has an accurate record of medical conditions as well as your doctor's contact details in the event of a medical issue arising during school/ETB activities. Please note it may be necessary to disclose this information to staff in certain circumstances)*

1) Doctor's Name _____

2) Name of practice (if relevant) _____

3) Phone Number (Clinic) _____

4) Health concerns for child.

5) Procedures to follow (for a particular illness).

6) Does the child require glasses? Yes No

7) Does the child have any hearing difficulties? Yes No

8) Any other medical concerns/information of relevance?

Part 4 (Data Protection)

Personal Data on this Form Meánscoil Iognáid Rís, Drimnagh Castle CBS is registered as a Data Controller under the Data Protection Acts 1988 and 2003. The personal data supplied on this application form is required for the purposes of:

- student enrolment,
- student registration,
- allocation of teachers and resources to the school
- determining a student's eligibility for additional learning supports and transportation
- examinations
- school administration,
- child welfare (including medical welfare)
- and to fulfil our other legal obligations

Contacting You

Please confirm if you are happy for us to contact you by SMS/text message/Smart Phone App, and to call you on the telephone numbers provided and to send you emails for all the purposes of:

- sports days,
- parent teacher meetings,
- school concerts/events,
- to notify you of school closure (e.g. where there are adverse weather conditions),
- to notify you of your child's non-attendance or late attendance or any other issues relating to your child's conduct in school,
- To communicate with you in relation to your child's social, emotional and educational progress, and to contact you in the case of an emergency

Tick box if "yes" you agree with these users

Use your email address to alert you to these issues?

Use your mobile phone number to send you SMS texts to alert you to these issues?

Use your mobile phone/landline number to call you to alert you to these issues?

Please Note: Meánscoil Iognáid Rís, Drimnagh Castle CBS reserves the right to contact you in the case of an emergency relating to your child, regardless of whether you have given your consent.

While the information provided will generally be treated as private to Meánscoil Iognáid Rís, Drimnagh Castle CBS, and will be collected and used in compliance with the Data Protection Acts 1988 and 2003, 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, An Garda Síochána, the Health Service Executive, TUSLA, social workers or medical practitioners, the National Council for Special Education, any Special Education Needs Organiser, the National Educational Psychological Service, or (where the student is transferring) with 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.

Data Protection Policy of Meánscoil Iognáid Rís, Drimnagh Castle CBS

A copy of the full Data Protection Policy of Meánscoil Iognáid Rís, Drimnagh Castle CBS is available on request. When you apply for enrolment, you will be asked to sign that you consent to your data/your child's data being collected, processed and used in accordance with this Data Protection Policy during the course of their time as a student in the school.

Photographs of Students

The school maintains a database of photographs of school events held over years. It has become customary to take photos of students engaged in activities and events in the interest of creating a pictorial as well as historical record of life at the school. Photographs may be published on our school website or in brochures, newsletters, local and national newspapers and similar school-related productions. .

CONSENT (TICK ONE ONLY)

1. ***If you are happy to have your child's photograph taken as part of School activities and included in all such records tick here (for the duration of their time in School)***

2. ***If you would prefer not to have your child's photograph taken and included in such records, please tick here***

3. ***If you are happy for your child's photograph to be taken and included as 1. above, but would prefer not to have images of your child appear on the website, school brochures, yearbooks, newsletters etc. please tick here***

Signed

(Parent/Guardian)

(Parent/Guardian)

Date

**This document will be held in a file accessible by the teaching staff of
Meánscoil Iognáid Rís, Drimnagh Castle Secondary School.**

NAME OF STUDENT: _____ **D.O.B.:** _____

Please indicate below information you wish to be made available through this file

MEDICAL

CONDITION

HOW THIS IMPACTS ON LEARNING

LEARNING NEED

NATURE OF DISABILITY

HOW THIS IMPACTS ON LEARNING

OTHER

Signed: _____ **Date:** _____

Update/Amendments:

Date:

Amended By:

Consent Form for Sensitive Personal Data for the School's October Return to the Department of Education and Skills

Certain sensitive personal data which the Department asks post-primary schools to furnish via the "Annual Post-Primary School October Return/Examination Entries" process requires your written consent for your child's school to record this information and for the school to forward this information to the Department for purposes as outlined in circular 0047/2010 a copy which is available at www.education.ie or on request from your child's school.

Please note that the reference to "you" in this consent form means a parent or a guardian of a student, or a student aged 18 years and over who is attending a recognised post-primary school.

Please enter the following details in BLOCK CAPITALS

Name of School: Meánscoil Iognáid Rís, Drimnagh Castle CBS

Name of Parent/Guardian: _____

Name of Student: _____

Class year of student: _____

1. **Where your child is enrolling for 1st Year do you or your child possess a medical card?** *(please CIRCLE the appropriate answer)*

YES NO

2. **Is English or Irish the MOTHER TONGUE (language the student speaks as their first language)?**

Yes or No _____

3. **To which ethnic or cultural background does the above student belong? Please circle only one category (these categories are based on the Census)**

- I **White Irish**
- II **Irish Traveller**
- III **Roma**
- IV **Any other white background**
- V **Black or Black Irish – African**
- VI **Black or Black Irish – any other Black background**
- VII **Asian or Asian Irish – Chinese**
- VIII **Asian or Asian Irish – any other Asian background**
- IX **Other – including mixed background**
- X **No consent**

** "Traveller Community" means the community of people who are commonly called Travellers and who are identified (both by themselves and others) as people with a shared history, culture and traditions including, historically, a nomadic way of life on the island of Ireland. Section 2(1) of the Equal Status Act, 2000*

Signed: _____ **Date:** _____
Parent/Guardian

Please complete this form and return to Meánscoil Iognáid Rís, Drimnagh Castle CBS. This form will be retained by the post-primary school and will be made available for inspection by authorised officers of the Department or from the Office of the Data Protection Commissioner.