

St. Oliver's National School

Enrolment Form



Details of Child		
Name		
Address		
PPS Number		
Date of Birth		
Nationality		
Religion		
Details of Parents		
Mother		Father
Name		Name
Address		Address
Contact number		Contact number
Email		Email
Preferred Number for school text messages		
Emergency Contact Details		
<p>We make every effort to ensure the safety of your child but we may need to contact you in the event of an accident or an unexpected closing.</p> <p>Please provide us with Alternative Contact Numbers (not your own number.) Please let us know if this person is a relation, minder, friend of family etc. Please inform this person that their contact details are supplied and held by the school for this purpose.</p>		
Name	Number	Relationship to child
Preschool Attended: _____		
Years Attended: _____		
Previous School Attended: _____		
Years Attended: _____		

Medical/Educational Details

1. Medical conditions we should know about : - Please tick.

Speech ☐

Hearing ☐

Sight ☐

or other difficulties ☐ _____

2. Medical Conditions –

Asthma ☐

Epilepsy ☐

Heart Conditions ☐

Diabetes ☐

Other ☐ _____

3. Allergies –

Wasp Stings ☐

Food ☐ details _____

Other allergies _____

4. Does your child require regular medication?

Yes ☐

No ☐

If yes give details: _____

5. Does your child have any special educational, physical, emotional, language etc. needs?

Yes ☐

No ☐

If yes give details:

6. Has your child ever been assessed for any reason?

Yes ☐

No ☐

7. If yes, are reports available?

Yes ☐

No ☐

Please supply reports if available

8. Are there any issues you think the school may need to know about?

9. Does your child show any behaviour challenges?

10. In the event of an emergency, should we fail to contact you, do you give permission to the School to bring your child to doctor/hospital?

Yes ☐

No ☐

Signed: _____ Date: _____

Please make the above arrangements clear to your child

Family Doctor _____ Family Dentist _____

Please Read the following and answer yes/no as appropriate

School Payments

I understand that there will be certain costs relating to my child's education in St.Oliver's National School. These materials will be mainly in the area of books, book rental, educational equipment and materials.

I agree to pay these costs:

YES

NO

School Trips

Do you give permission for your child to go on school trips under teacher supervision during the school day e.g nature walks, visits to local historical buildings etc.

YES

NO

Photographs

Sometimes journalists 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 for school projects, local newspapers, and school related activities?

YES

NO

The Board of Management cannot be held responsible for pictures/video taken by parents at the Celebrations, School Concert etc.)

Do you give permission for your child's photo to be used on the school website and Facebook page?

YES

NO

Passing On of Information

Sometimes the school is requested to pass on names of children and their addresses to the Health Board for immunisation purposes, to secondary schools when children are transferring to second level, to sporting bodies when children are taking part in games outside the school. Do you allow the school to pass on this information to these three bodies?

YES

NO

Swimming

Do you give permission for your child to take part in Swimming lessons organised by the school from 1st class onwards?

YES

NO

Diagnostic/Educational Tests

During your child's time in St. Oliver's N.S. he/she will undergo various Diagnostic/Educational Tests. Should my child require educational/diagnostic testing during his/her time in St. Oliver's N.S. I give permission for these tests to be carried out.

YES

NO

School Policies

I have read the policies supplied and I undertake to support, co-operate and carry out St. Oliver's National School Policies.

- My child will wear the school uniform and on P.E. days will wear the school tracksuit.

YES

NO

- I accept and agree to adhere to the school

Code of Behaviour

Anti-Bullying Policy

YES

NO

The information I have given in this form is accurate

In signing this application form I am agreeing to support the Board of Management and staff in their implementation of school policies. I am aware that all school policies including policies on behaviour, anti-bullying, attendance, child-protection etc. are available on request. I agree to support the staff in their efforts to provide a positive learning experience for all children in the school.

Parent/s signature: _____ Date: _____

Parent/s signature: _____ Date: _____

IF ANY OF THE DETAILS IN THIS FORM CHANGE - FOR EXAMPLE, IF YOU MOVE HOUSE, CHANGE YOUR PHONE NUMBER ETC. WOULD YOU PLEASE INFORM THE SCHOOL AT THE EARLIEST OPPORTUNITY.