APPLICATION FOR ADMISSION OF NEW PUPILS YEAR 2027/2028

The Department of Education and Skills is developing an electronic database of primary school pupils called the Primary Online Database (POD) which will involve schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database will allow the Department 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 data base will also contain, on an optional basis, information on pupil's religion and on their ethnic or cultural background.
In order to assist with the gathering of data please complete this form and return to the school. This form will be retained by the school.

Pupil Forename: _____ Pupil Surname: _____

Birth Cert Forename: _____ Birth Cert Surname: _____
(if different to above) (if different to above)

PPSN of Pupil: _____ Mother's Maiden Name: _____

Date of Birth: _____ Gender Male ☐ Female ☐

Pupil Address 1: _____ Pupil Address 2: _____

County: _____ Nationality: _____

Pre School attended _____

'Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English? Yes ☐ No ☐

Religion: _____
Do you consent to uploading data relating to religion to POD: Yes ☐ No ☐

To which ethnic or cultural background group does your child belong (please tick one)?
(Categories are taken from the Census of Population)

White Irish ☐ Irish Traveller ☐ Any other White Background ☐
Roma ☐ Black or Black Irish - African ☐ Any other Black Background ☐
Asian or Asian Irish - Chinese ☐ Any other Asian background ☐ Other (inc. mixed background) ☐

Do you consent to uploading data relating to ethnicity to POD: Yes ☐ No ☐

The following information is required for efficient running of the school and will not be uploaded to POD

Mother's Name _____ Father's Name _____

Telephone No. _____ Telephone No. _____

Email address: _____

Medical History (including any relevant assessment reports):

_____

_____ **Medical Card Holder: Yes No**

Allergies:

_____

Medication: _____

Doctor Name & Address: _____

If parent/Guardian not available, please contact: _____

Additional Educational Needs, eg: poor vision, hearing, attending speech therapy,

_____

Involvement of any other agency: _____

Please make the school aware as early as possible of any family situation such as bereavement, separation, court order that affects the child's welfare and also names of any persons into whose custody the child should/should not be given so that we can be as supportive as possible.

_____

Please answer YES or NO to the following (please circle as appropriate):

- **Our child is allowed to take part in the RSE Programme: YES NO**
- **Our child can be taken to hospital in case of emergency (in the event of emergency, this may mean your child being transported to casualty/A&E by a staff member in his/her car) YES N0**
- **Inclusion of our child's photographs on our school social media page: YES NO**
- **Inclusion of our child's photographs in a local/national newspaper: YES NO**
- **Use of a nominated mobile number by the school for communication and emergencies. Please nominate one mobile number:** _____
- **We have received a copy of the " Code of discipline": YES NO**
- **We will support & co-operate with staff of the school: YES NO**
- **Our child may take part in school field trips/outings during the school day: YES NO**

I wish to apply to enrol my child in Scoil Mhuire, Ramelton and I agree to comply with the Code of Behaviour/School Rules, Policies and the Ethos Statement of the school as set out by the Board of Management.

Signature Parent/Guardian:

Date

Signature Parent/Guardian:

Date
