



Lárscoil an Easpaig O'Gealbháin
BISHOP GALVIN CENTRAL SCHOOL
NEWCESTOWN
BANDON
CO. CORK

021 7338158
email: secretary@newcestownns.ie

Roll No. 19348V
website: www.newcestownns.ie

Application to Enrol / Pupil Information Database

Pupil Information:

Child's Full Name: _____

Address _____

_____ Eircode: _____

Date of Birth: _____ P.P.S: _____ Male / Female: _____

Year starting school: _____

Nationality: _____

Family Doctor: _____ Address: _____

Phone No. _____

Contact in Case of Emergency: Name: _____

Relationship to child: _____ Contact Phone No: _____

As a means of communication we operate through an app, Aladdin Connect. For registration and download please provide us with an email address and mobile number for either or both parents. Once your child has started in school you will be able to download the Aladdin Connect App.

Email No. 1. _____ Mobile No. 1. _____

Email No. 2. _____ Mobile No. 2. _____

Previous to your child starting school we use the "Text a Parent App" as a means of communication and once your child has started school, the Aladdin Connect App is used predominately. Please provide us with a nominated mobile number: _____

Parental Information:

Mother/Guardian:

Name: _____

Address: _____

Occupation: _____

Day time contact No. _____

Mobile No. _____

Email: _____

Father/Guardian:

Name: _____

Address: _____

Occupation: _____

Day time contact no: _____

Mobile No. _____

Email: _____

Have you children already attending this school? Yes No

Have you younger children to enrol in the future?

Name: _____ DOB: _____

Name: _____ DOB: _____

Preschool Information:

Has your child attended preschool? Yes / No

If yes, state name and address of preschool _____

Additional Information:

Does your child have any condition / needs which may impact on his / her life?

(Examples: Allergies, medical conditions, toileting problems, Speech and Language difficulties / delay, socialisation concerns, developmental delay)

Relevant Health/Medical Information;

If there is any other information regarding your child's welfare which you feel would be of assistance to us, please indicate below. If the information is of a sensitive nature, please make an appointment to speak with the teacher or principal.

Does any legal order under family law exist that the school should know about? Yes / No.

Assessments: Has your child had a Speech & Language, Occupational Therapy or Psychological Assessment, if so please inform the school and supply a copy of same

The Education Welfare Act: If your child is absent for any reason, please ensure you give a note to class teacher on his/her return. Once a pupil is absent for 20 days or more, the school is obliged to inform the National Education Welfare Board.

The Board of Management cannot be held responsible for pictures/videos taken by others at school events / celebrations.

Information Technology (IT) and internet resources are intended for educational purposes. Every reasonable precaution will be taken by the school to ensure your child's safety, online and otherwise. (see A.U.P. policy)

Consents and Declarations

1. In the case of illness or accident, do you empower school staff to perform First Aid and, if necessary, the use of (CPR) and / or the use of a Defibrillator (AED)?	Yes / No
2. In the case of serious illness or accident, do you give permission for your child to be taken straight to hospital.	Yes / No
3. Do you give permission for your child's uniform to be changed by a teacher/sna in the presence of another adult in case of illness or toilet accident?	Yes / No
4. Do you permit school staff to undertake diagnostic testing, should it be deemed beneficial?	Yes/No
5. Do you permit the use of your child's photograph, video appearance and sound recordings in school displays and publications?	Yes / No
6. Do you permit the use of your child's photograph, video appearance and sound recordings on the school website and/or Facebook page?	Yes / No
7. Do you give permission for your child to go on school trips under teachers supervision? (eg.GAA games, Basketball, athletics, school tours, history/educational tours).	Yes / No
8. Do you consent to the sharing of information with another Primary School or Second Level School to which your child may transfer?	Yes / No
9. Do you comply with the implementation of our Code of Behaviour including the school rules	Yes / No

If no to any of the above, please provide additional information.

Signed: _____

Mother / Guardian

Signed: _____

Father / Guardian

Date: