ENROLMENT FORM

Child's Name (as on birth cert)						Date of Birth	Droglesto				
Address						Eircode:					
Child's PPS No.		Home phone				Birth cert (enclosed)		[]			
Nationality of Child				Alternative Contact Name & Number in case of emergency							
Date starting School				Class							
Mother's Name				Father's Name							
Marital Status		Mother: Married Single Other	Married [] Married [] ingle []			dical Card Yes [] No [] ease tick)					
Mother's Mobile				Father's Mobile							
Mother's email Please print clearly				Father's email Please print clearly							
Mother's Present Employment				Father's Present Employment							
Mother's Level of Education		Primary [] Junior Cert [] Leaving Cert [] FETAC [] Degree []		Father's Level of Education	Primary [] Junior Cert [] Leaving Cert [] FETAC [] Degree []						
Nationality of Mother				Nationality of Father	•						
Brothers / Sister(s) in this School	his		Class	Name, Address & Phone No. of previous school / Presch			school.				
Does your son/ daughter have any allergies or medical conditions that the school should be aware of?											
In the event of an emergency, should we fail to contact you, do you give permission to the School to bring your child to a doctor or the hospital? Yes: [] No: []											
IMPORTANT Has your child Does your child Speech & Lan Physiotherapy Occupational	d ever rece ld receive a guage The	any of the		Yes [] No Yes [] No	[] []	it most recent	report).				

To which ethnic or cultural background group does your child belong (please tick one)?												
(Categories are taken	from	the Census of Population)									
White Irish		Any other White Ba										
Black or Black Irish - African Black or Black Irish - Any other Black Background												
Asian or Asian Irish - Chinese Asian or Asian Irish - Any other Asian background												
Other (inc. mixed backs	ground	d) Irish Traveller		No consent								
Roma												
What is your child's religion?												
Roman Catholic		Church of Ireland (incl. Protestant)		Presbyterian								
Methodist, Wesleyan		Jewish		Muslim(Islamic)								
Orthodox (Greek, Coptic, Russian	n)	Apostolic or Pentecostal		Hindu	0							
Buddhist		Jehovah's Witness		Lutheran								
Atheist		Baptist		Agnostic								
Other Religions		No Religion		No Consent								
If Roman Catholic: Place of Baptism Baptismal Cert Enclosed Yes No												
'Is one of the pupil's mo Yes □	other t No	ongues (i.e. language spok	en at home) Irish	or English?								
transferred to the Dep	artme	n including PPSN to be st nt of Education and Skill of their time in primary sch	s and any other	•	,							
Signed:												
Parent/Guardian												
Date:												

[&]quot;We gather and process your child's personal data for the purposes of administering the education of your child. To facilitate this, we will input your child's data into the schools Management Information System, Aladdin. Aladdin is a secure software as a service application which is owned and run by Cloudware Ltd. (T/A Aladdin Schools), from where the data is only processed for the above purpose."