

Name & address of Medical Practice

(if contact is required in relation to the above health concern/illness or other medical issue)

Name of Medical Practice

Telephone Number

Name of Doctor

Address

Part 4 Additional Educational Needs

(Please be advised that we may contact the Primary school in connection with your child's enrolment)

Please provide details of any additional educational needs your child may have.

Was your child in receipt of any resource hours? (please give details) Yes No

Does your child have an exemption in Irish? Yes No

Normally only granted if your child has (a) a psychological assessment recommending an exemption, which must have been carried out within the last 3 years (b) the child has lived outside Ireland until 11 years of age or (c) if you child is a non-national

Has the student a psychological assessment? Yes No

Is the psychological report available? Yes No

Is the psychological report attached? Yes No

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:

Declaration

- I/we hereby apply for a place in Scoil Mhuire, Buncrana for my son/daughter. I/we and my/our child accept the Catholic ethos of the school and respect and understand the value system this entails.
- I/we accept the right of the school to impose sanctions for misconduct in accordance with the school's Code of Behaviour. I/we undertake to support Scoil Mhuire in the application of the School's Code of Behaviour with regard to my/our son/daughter. (Code of Behaviour available at www.scoilmhuirebuncrana.ie)

Student

Name (please print)

Signature:

Date

Parent/Guardian

Name (please print)

Signature:

Date



**Scoil Mhuire
Convent of Mercy
Buncrana**

Application Form 2020

Inspired by the vision of Catherine McAuley,
Scoil Mhuire, Buncrana is committed to the holistic
development of each student.
We pursue excellence in an inclusive, caring and
respectful environment.

Name: _____

Secondary School attended: _____

The school is a Data Controller under the Data Protection Acts 1988 and 2003. Personal data supplied on the Enrolment Form will be used for the purposes of student enrolment, registration, administration, child welfare and to fulfil any other legal obligations. While the information provided will generally be treated as confidential to the school, from time to time it may be necessary for the school to exchange personal data on a confidential basis with other bodies including the Department of Education and Skills, Department of Social & Family Affairs, An Garda Siochana, the Health Service Executive and Tusla (Child and Family Agency). Contact details will also be used to notify you of school events and activities.

Are you happy to give permission and consent that photographs/digital images (including video) may be taken for promotional and record purposes during activities which may include your child.

Yes No



St. Oran's Road Buncrana Co. Donegal
Tel: 074 93 61065 | info@scoilmhuirebuncrana.ie
www.scoilmhuirebuncrana.ie



Application for Enrolment 2020-2021

Please complete and sign back of Application Form.
Closing date for return of Application Form is Thursday 19 December 2019

Please attach
Passport Photo

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

Child's First Name/s

Child's Last Name

Male/Female

Date of Birth (attach copy of birth cert)

D D - M M - Y Y Y Y

Home Telephone Number

Parental mobile No. for texting service

□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

Home Address

Child's PPS No. (required)

□ □ □ □ □ □ □ □

Eircode

Secondary School attended

Parent/Guardian and Family Information

Mother/Guardian Details

First Name

Last Name

Maiden Name (Mother)

Relationship to Child

Address

Phone No. (Mobile)

Phone No. (Work)

Phone No. (Home)

Email Address

Father/Guardian Details

First Name

Last Name

Relationship to Child

Address

Phone No. (Mobile)

Phone No. (Work)

Phone No. (Home)

Email Address

Other Emergency Name and Contact Number

Name

Phone No.

Relationship to Child

Please give details of any relevant information regarding access to, custody of and/or legal orders pertaining to your child. Please note that school correspondences are sent to the home address unless alternative requests are made and written consent and details are furnished.

Name(s) of brothers/sisters currently attending Scoil Mhuire;

Name

Year Group as of September 2019

Name(s) of brothers/sisters who previously attended Scoil Mhuire;

Name

Year Attended

Part 2 – Collection of Student Data (For return to the Department of Education & Skills)

What is the student's nationality?

Nationality is the preferred nationality which the parent/guardian (or student, where of an age deemed competent to do so), so provides. It is chosen regardless of whether the student is adopted or has dual nationality.

Is English or Irish the mother tongue of the student? Yes No

This is the language a child speaks as their first language

To which ethnic or cultural background does the above named student belong? Please select only one category (these categories used are based on the Census). If you do not wish to answer this question please select 'No Consent'

- | | |
|---|--|
| <input type="checkbox"/> White Irish | <input type="checkbox"/> Irish Traveller |
| <input type="checkbox"/> Roma | <input type="checkbox"/> Any other White Background |
| <input type="checkbox"/> Black or black Irish – African | <input type="checkbox"/> Black or Black Irish – any other Black background |
| <input type="checkbox"/> Asian or Asian Irish – Chinese | <input type="checkbox"/> Asian or Asian Irish – Any other Asian background |
| <input type="checkbox"/> Other – including mixed background | <input type="checkbox"/> No consent |

Where your child is enrolling for 1st Year do you or your child possess a medical card? Yes No

Part 3 Medical Details

(Required should it be necessary to contact the doctor in the event of a medical issue arising during school or on activities. Please note it may be necessary to disclose this information to staff in certain circumstances)

Health concerns for child, include any illness such as asthma, diabetes, epilepsy, hearing/visual difficulties or any allergies etc).

Procedures to follow (for a particular illness).