## St. Brigid's National School

St Brigid's NS

Phone: 047 55222 email: info@stbrigidsns.ie Charity No: 20109783

## ENROLMENT APPLICATION

Date of Application:		Class into which child wishes to enter:	
	D9 D	N-4-21-	
Einst Name.	Pupil D		
First Name:		Surname:	
Address			Eircode:
radicas			Lifeode.
Date of Birth:	*Date and place of Baptism:	PPS No:	Religion:
If annlicable, please list be	others and sisters already in	St Brigid's N S:	
if applicable, piease list of	others and sisters arready in	St. Diigid 5 14.5.	
If starting in Junior Infants, please give details below of any Nursery, Playschool, Montessori attended:			
			•
TE turn of a min or function		41	the mustices asked to
ii transferring from	n another school, please share	e the name and address of the	the previous school:
Pupil Information will k	oe shared with the Department of	Education and Skills via the P	Primary Online Database
-	Pare		•
	's Details		's Details
Name:		Name:	
Surname:		Surname:	
PPS No:		PPS No:	
Occupation:		Occupation:	
Phone		Phone	
Home:		Home:	
Mobile:		Mobile:	
Email:		Email:	
Guardian(s) - if Applicable			
Name:		Name:	
Occupation:		Occupation:	
Phone		Phone	
Home:		Home:	
Mobile:		Mobile:	
Email:		Email:	
	Alternative	Contacts	
Name:			
Phone:			
Relationship to child:			
Nama			
Name: Phone:			
Relationship to child:			
Kerationship to child:			

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For Children of Non-Irish Parents
Child's first language:
Year of arrival in Ireland:
Mother's/Father's country of birth:
Are there any court orders in place regarding your child? Yes No
If yes, it is essential that the parts of this order pertaining to school be shared prior to enrolment
Please list any problems your son/daughter may have in relation to health (allergies, epilepsy, asthma, sight,
hearing, speech, fainting, toilet training etc,)
If your son /daughter has ever been referred to any of the following, please give details – Speech Therapist, Eye/Ear specialist, Child Guidance Clinic, Psychological Services or other.
Eye/Ear specialist, Cliffd Guidance Cliffic, Esychological Services of Other.
During the course of the school year, all classes will normally undertake a variety of different activities
outside the school premises e.g. visit the church, swimming, football matches, choir, rounders, athletics, school tours, history/educational tours etc.
serioof tours, mistory, educational tours etc.
Do you consent for your child to take part in these activities outside the school premises?
YES: NO:
Do you give permission for your child to access the internet, and for any work to be published, in line with
our policies?
YES: NO:
We publish photos, and/or videos of students occasionally, either in the local paper or on the school website,
engaged in school related activities (fundraising, sports days, Christmas performances etc) Do you give
permission to publish photos of your child, should the occasion arise?
YES: NO:
** Please attach a copy of the Birth Cert for school records
rease attach a copy of the Birth Cert for school records
**If your child was baptised outside of Annagh Parish, please provide a copy of their Baptismal Cert
for school records
I/We understand the education aims of the school, the school's Code of Behaviour and Acceptable Usage
Policy and will ensure that my/our child will abide by them.
I/We confirm that all the details above are correct.
Signed: 1
Signed: 2
Date:
~ ·····