



Grace Park Road, Athlone, Co. Westmeath
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	FOR OFFICE US	E ONLY		
Form Received:/ I	Birth Cert Attached: Y/N	Photo att	ached: Y/N	
Letter of Acceptance sent Y/N L	etter of Acceptance return	ned Y/N	Starter In	formation Pack sent: Y/N
Any information you give on this form child's needs prior to enrolment. Fillin application will not be accepted unless RELEVANT INFORMATION MAY REND	ng in this application form of syou enclose your child's of	does not gu original Birt	arantee a place h Certificate. FA	in our School. Your
PERSONAL DETAILS SECTION: USE BLC	OCK CAPITALS PLEASE:			
L. Name of child as on Birth Certificate:				Male/Female:
2. Date of Birth:	PLEASE ATTACH ORIGIN	IAL BIRTH (CERTIFICATE	PLEASE
3. Mother's maiden Surname: 4. <u>Name and class level</u> of siblings alrea				ATTACH A PASSPORT PHOTO Digital Photo Accepted
5. Number of children in the family:	6. Placing	g of child (1	st, 2 nd etc.):	
7. (a) PARENTS/Guardians: The followi	ng information on both pa	rents is ne	eded for registr	ation purposes.
Name:	Name:		_	
Occupation:				
Nationality:	Nationa	lity:		
Mobile No:				
Language/s spoken at home:				
(b) With whom does the child norm				
(c) Is the family a one-parent family				
3. Home Address:	-			

9. Home Phone No.: _______ 10. Mobile No. for "text-a-parent": _____

11. Email address of Parent(s)/Guardians(s):	
12. 1 st contact person if parent not available:	Name:
	Phone No
2 nd contact person if parent not available:	Name: Phone No
13. Religion:	Place of Baptism (If applicable):
PLEASE ATTACH COPY OF BAPTISIMAL CERTIFIC	ATE if child is baptised outside the parish.
14. Country of Birth:	
15. Ethnic or Cultural Background: Please choos	
	Roma: Any other white background:
Black/Black Irish/African: Black/Black	
Other:	an Irish – any other Asian background:
16. Child's P.P.S. No. :	(The P.P.S. number is required by the Department of
Education & Skills for registration purposes).	
Medical Card Number (if applicable)	
17. Name and address of pre-school or previou	is school attended:
	nd relevant members of staff of St. Mary's National School to discuss
	ger/Principal of the pre-school/school listed above.
the needs of my son/daughter, with the Manag	Yes No
19. Name and phone no. of Family Doctor:	
20. Has your child ever been referred to a spec	ialist by your doctor?
If yes, please give brief details of referral:	

1. Has your child any special medical needs i.e. allergies, nut allergies, asthma: Yes No
yes, please give brief details:
2. Does your child appear to have any difficulties with the following?
Yes Speech: Yes Vision: Yes No
you have answered yes to any/all of the above please give details (use the back of this sheet if necessary)
3. Has your child been assessed or referred for psychological assessment i.e. behaviour, emotional etc.?
yes, please attach all relevant details and reports. Yes No
4. Has your child any special educational requirements i.e., Speech Therapy, Occupational Therapy etc.? Yes No
yes, please give brief details:

PARENTAL PERMISSION SECTION:

25. Do you give permission for your child to go on school trips unde	r teacher supervision during the school day e.g. trips to the
local town park, local historical buildings, library,	
Local nature trail/Greenway, sporting matches	Yes No
26. Do you give permission for your child to consume food provided	by the school under DEIS School Meals Programme? E.g.
Morning Munch, Sandwich Lunch bag, Termly treats,	Yes No
27. Do you give permission for your child to be withdrawn from class	for assessment, accessing extra support and/or
participating in in-class support with a member of the SEN?	Yes
(Special Educational Needs) Team.	No
28. Do you give permission for the Principal or Special Educational No.	eeds Co-ordinator within the school to discuss your child's
needs with the SENO (Special Educational Needs Officer) for SNA	Yes
access? (if the need arises)	No
29. Sometimes journalists/school visit our school to take pictures/vio	deos of the children e.g. awards/prizes, sporting events,
first day at school etc. Do you give permission for your child to be ph	otographed for school projects, local newspapers and
school related activities?	Yes No
30. The school photographer visits our school to take photos of pupil	s for school identification purposes e.g. school Aladdin
system. Do you give permission for your child to be photographed fo	r this purpose?
	Yes No
31. The Board of Management cannot be held responsible for picture	es/video taken by parents at outings, celebrations, school
performances etc.	
I am aware that no parent has permission to photograph or record ar	ny child other than their own on school premises e.g.
Christmas Concerts, Sports days, school outings	Yes No
32. Please visit our school website www.stmarysprimaryschoolathlo	ne.ie. Do you give permission for your child's
photos/videos to be used on the school website?	Yes No
33. Sometimes the school is requested to pass on names of children	and their addresses to the Health Board for immunisation
purposes; to schools when children are transferring to another school	l; to sporting bodies when children are taking part in
games outside the school. Information Data is also stored on the Prin	mary Online Database (POD) and transferred to the

Yes

No

Department of Education & Skills. This information includes: name, addresses, PPS number, ethnic/cultural background and

religion. Do you allow the school to pass on this information to these bodies?

34. The school teaches Relationship and Sexuality education (RSE) using the guidelines provided by the Department of
Education and Science. If you would like to view the content of the programme used in the school for teaching RSE you are
welcome to do so. If you have any concerns with regard to RSE please tick this box so that an appointment will be made with
the Principal to discuss your concerns. Yes No
35. In case of serious accident/illness/emergency, I give permission to the teachers in charge to take the child to the nearest
doctor.
Signed
36. I have read and I understand the school rules for responsible internet use and give permission for my child to access the internet. I understand the school will take all responsible precautions to ensure pupils cannot access inappropriate materials. Understand the school cannot be held responsible for the nature of the content of materials accessed through the internet. I agree that the school is not liable for any damages arising from use of the internet facilities. Signed
37. Is there any other information you would like us to know:
In signing this application form I am agreeing to support the Board of Management and staff in their implementation of schoo policies including the school's Code of Behaviour – (all available to view on www.stmarysprimaryschoolathlone.ie) I agree to support the staff in their effort to provide a positive learning experience for all children in the school. 1st Parent/Guardian's signature: 2nd Parent/Guardian's signature:
IF ANY OF THE DETAILS IN THIS FORM CHANGE – FOR EXAMPLE, IF YOU MOVE HOUSE, CHANGE YOUR PHONE NUMBER ETC. WOULD YOU PLEASE INFORM THE SCHOOL AT THE EARLIEST OPPORTUNITY
Signature of parent/guardian:
Date of application:

PLEASE DON'T FORGET TO ATTACH A COPY OF ALL ASSESSMENTS RELATING TO YOUR CHILD'S DEVELOPMENT AND/OR NEEDS.