



# SCOIL EOIN, INIS EONÁIN



PRINCIPAL: CAROL NÍ CHUIMÍN B.ED, M.A

## Application Form / Pupil Information Database

Child's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

\_\_\_\_\_

PPS Number: \_\_\_\_\_

\_\_\_\_\_

Year Starting School: \_\_\_\_\_

Eircode: \_\_\_\_\_

Irish version of Child's name if known: (otherwise school will translate): \_\_\_\_\_

Playschool attended (if any) \_\_\_\_\_

Father's/Guardian's Name: \_\_\_\_\_

Mother's/Guardian's Name & Maiden Name: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_

Date and Place of Baptism: \_\_\_\_\_

### CONTACT DETAILS:

Home: _____
Work: (Father) _____ Mobile: _____
Work: (Mother) _____ Mobile: _____
Email: _____
Mobile Numbers for School App: 1. _____ 2. _____
Other Contact Numbers Name: _____ Number: _____ Name: _____ Number: _____
Family Doctor: _____ Phone: _____
Address: _____



021 4775457  
086-4106194



[inischeoin@gmail.com](mailto:inischeoin@gmail.com)

Web: <http://www.inishannonschool.com>

MOL AN ÓIGE AGUS TIOCFÁIDH SÍ.

Please completed the following general information

<p><i>Please put an X in the box you consider best describe your child in each case</i></p>	<p>A L W A Y S</p>	<p>U S U A L L Y</p>	<p>S O M E T I M E S</p>	<p>S E L D O M</p>	<p>N E V E R</p>
1. Speaks clearly					
2. Helps with activities in the home					
3. Carries on simple conversation					
4. Is independent of parents/guardians					
5. Goes to toilet by himself/herself					
6. Is shy when he/she meets unfamiliar children					
7. Is shy when he/she meets unfamiliar adults					
8. Is easily upset					
9. Is aggressive when he/she meets unfamiliar children					
10. His/her attention jumps easily from one thing to another					
11. Is subject to temper/tantrums					
12. Is extra talkative					

Name of any previous schools attended: \_\_\_\_\_

Class: \_\_\_\_\_

(Please bring letter of transfer together with attendance record and results of standardised test, special needs requirements.)

Does any legal order under family law exist that the school should know about?

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(The school should be made aware of any court order which effects the child welfare and also the name of any person into whose custody the child should not be given.)

**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.

**Assessment:**

Has your child had a Speech & Language, Occupational Therapy or Psychological Assessment, if so please supply a copy of same

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**Additional Information/Needs:**

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

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

Do you give permission for your child to go on school trips and tours under teacher supervision?

Yes	
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No	
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From time to time children partake in matches competitions and other school activities at which, school personnel or outside agencies may photograph or video these events and such photographs may be published. Do you give permission for your child to be photographed?

Yes	
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No	
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The Board of Management cannot be held responsible for pictures/videos taken by others at school events/celebrations.

Do you give permission for your child's photo to be used and their work displayed on the school website?

Yes	
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No	
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The Stay Safe Programme and Relationships & Sexuality Programme are implemented in Scoil Eoin.

Signed: \_\_\_\_\_ Parent/Guardian Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Parent/Guardian Date: \_\_\_\_\_

Please return this form to Scoil Eoin, together with a copy of Birth Certificate.

For office use only
Received on
_____