



# St Francis School

Borris Road  
Portlaoise  
Co Laois R32 DN24

(057) 8621847

Roll No. 19337Q

## APPLICATION FOR ENROLMENT

Class \_\_\_\_\_

CHILD			
Child's First Name:		Child's Surname:	
Sex: Male <input type="checkbox"/>	P.P.S. No:	Date of Birth:	Child's Nationality:
Female <input type="checkbox"/>			
Home Address:		Previous School/Playschool:	
Name(s) of siblings who attend/attended St Francis School:		Religion: Was he/she baptised in the Roman Catholic Church? Yes <input type="checkbox"/> No <input type="checkbox"/> Place:	
Is medication required to be administered in school: Yes <input type="checkbox"/> No <input type="checkbox"/>		Doctor's Name:	
Detail of any health conditions (e.g. Asthma, eyesight, hearing, allergies etc.) or emotional problems which may affect your child at school:			
Has your child had a psychological assessment? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Date of last assessment: _____			
Assessed learning disability: _____			
Have you a written recommendation from a psychologist that your child enrol in a special school (this is necessary for enrolment): Yes <input type="checkbox"/> No <input type="checkbox"/>		Has your child received a speech & language report: Yes <input type="checkbox"/> No <input type="checkbox"/>	

PARENT/GUARDIANS	
<i>Mother/Guardian:</i>	<i>Father/Guardian:</i>
Full Name:	Full Name
Mothers Nationality:	Fathers Nationality:
Address(if different from above)	Address(if different from above)
Home Telephone No.	Home Telephone No.
Mobile No.	Mobile No.
Work No.	Work No.
Email Address:	Email Address:

<b>OTHER CONTACT / EMERGENCY CONTACT</b>	
<b>Name:</b>	<b>Name</b>
<b>Relationship</b>	<b>Relationship</b>
<b>Mobile No.</b>	<b>Mobile No.</b>



<b>OTHER INFORMATION</b>
<b>Do any legal order under family law exist that the school should know about: Yes <input type="checkbox"/> No <input type="checkbox"/></b>
<b>Is there any person who, for legal reasons, should not have access to this child during school hours? Yes <input type="checkbox"/> No <input type="checkbox"/></b>
<b>If you answer yes to one or both of these two questions please discuss with the principal</b>

**GENERAL CONSENTS FORM**

	<b>YES</b>	<b>NO</b>
<b>I consent that my child may receive any necessary medical care from a doctor, ambulance crew, hospital etc. in the event of an accident or illness occurring where the school is unable to contact the parents/guardians.</b>		
<b>I consent to my child going on supervised school outings such as sports events, Dunamais Theatre, Town Park, Library, Swimming Pool, Parish Church etc.</b>		
<b>I consent to the school submitting my child in group photographs, for use on the school website and school social media.</b>		
<b>I consent to my child's clothes being changed by school staff if they become soiled or wet.</b>		
<b>I consent to in-school educational tests for my/our child e.g. Belfield, Mist, Drumcondra, Sigma-T.</b>		
<b>I consent to Learning Support in English and/or Maths if my child meets the Criteria for support.</b>		
<b>I consent to my child taking part in the Stay Safe Programme.</b>		
<b>I consent to my child taking part in the RSE (Relationship &amp; Sexuality) Programme.</b>		
<b>I consent my child's name and address to be given to other agencies i.e. Parish, HSE (for Vaccinations, hearing and sight tests) etc.</b>		
<b>I/We have read and understood the above consents. I/We wish to enrol my/our child in the St Francis School, Portlaoise.</b>		
<b>I/We undertake to see that my/our child will attend school punctually and regularly.</b>		
<b>I/We confirm that I/We are aware that the data relation to this application will be kept in school files and may be used by School Management in the election of Parents/Guardians to the school Board of Management.</b>		
<b>I / We confirm consent to the Data on your application being shared with the NCSE, the Department of Education, the HSE or any other agency as appropriate to meet your child's needs, and to make application or consultation for relevant supports.</b>		
<b>I / We confirm that in the event of a placement not being available in our school, that the information can be shared with the National Council for Special Education, the Educational Welfare Officer, and / or any other appropriate agency who can assist in securing an appropriate placement and / or supports for your child.</b>		

**Please note that completion of this form is not a guarantee of a place in St Francis School, Portlaoise**

St Francis School Data Protection Policy sets down the arrangements in place to ensure that all personal data records held by the school are obtained, processed, used and retained in accordance with the following eight rules of data protection (based on the Data Protection Acts):

1. Obtain and process information fairly
2. Keep it only for one or more specified, explicit and lawful purposes
3. Use and disclose it only in ways compatible with these purposes
4. Keep it safe and secure
5. Keep it accurate, complete and up-to-date
6. Ensure that it is adequate, relevant and not excessive
7. Retain it for no longer than is necessary for the purpose or purposes
8. Give a copy of his/her personal data to that individual on request.

The information collected on this form will be held by St. Francis School in manual and in electronic format. The information will be processed in accordance with the General Data Protection Regulation (GDPR), the Data Protection Act, 1988 and the Data Protection (Amendment) Act, 2003.

The purpose of holding this information is for administration, to facilitate the school in meeting the student's educational needs etc.

Disclosure of any of this information to statutory bodies such as the Department of Education and Science or its agencies, the NCSE, the HSE, NEPS, TUSLA, Educational Welfare Officer, and or any appropriate body will take place only in accordance with legislation or regulatory requirements. Explicit consent will be sought from Parents/Guardians or students aged 18 or over if the school wishes to disclose this information to a third party for any other reason.

Parents/Guardians of students and students have a right to access the personal data held on them by the school and to correct it if necessary.

I consent to the use of the information supplied as described. The purpose of holding this information is for administration, and to facilitate the school in meeting the student's educational and/or medical needs etc.

**Parent/Guardian's Signature:** \_\_\_\_\_

**Parent /Guardian's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Date Received in Office:
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