



**St. Joseph's N.S.,  
Ardkill, Templeboy, Co. Sligo.  
096-47393**

Website: <https://stjosephstempleboy.com/>  
 @templeboyns

## **Enrolment Form**

Name of Child: \_\_\_\_\_

Name in Irish (*if known*): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (*Please enclose copy of child's long Birth Cert.*)

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

Eircode: \_\_\_\_\_ Home Telephone Number: \_\_\_\_\_

Father's name: \_\_\_\_\_ Present Employment: \_\_\_\_\_

Work telephone number: \_\_\_\_\_ Mobile number: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Present Employment: \_\_\_\_\_

Work telephone number: \_\_\_\_\_ Mobile number: \_\_\_\_\_

Number of boys in the family: \_\_\_\_\_ Number of girls in the family: \_\_\_\_\_

Position of child in the family: \_\_\_\_\_ (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>)

Playschool if any: \_\_\_\_\_

Previous class and name/address of previous school: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ (*if transferring from another school*)

Intended class: \_\_\_\_\_

Will your child participate in Religion class? \_\_\_\_\_

Do you consent to your child participating in RSE, Stay Safe Programmes? \_\_\_\_\_

Details of any health conditions (e.g. asthma, eyesight/hearing problems, allergies, etc.) or emotional problems which may affect your child at school: \_\_\_\_\_

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Any specific or educational needs your child may require: \_\_\_\_\_

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Names of persons who have permission to collect your child from school:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Name, address and tel. no. of family doctor: \_\_\_\_\_

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Acceptance of School Policy

I am aware that children enrolled in this school are required to comply and co-operate with policies on curriculum, organisation and management, as per the School Plan. I have been given copies of a number of relevant policies and I know that I may view all school policies at any time, by appointment. Specifically, I confirm that all policies including the Code of Behaviour are acceptable to me and that I will make all reasonable efforts to ensure my child's/children's compliance with this code and other policies.

Parents' Signatures: \_\_\_\_\_

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

**Illness/Accident/Emergency Procedures**

In the event of an emergency occurring while the school is in operation, it may be necessary to close the school. Also, if a child becomes ill or has an accident at school, the staff will need to be able to contact someone. In order to assist the school in these matters, you are requested to give the names and contact numbers of persons the school could contact.

A. In the event of an emergency occurring which necessitates the closing of the school or in the event of my/our child becoming ill or having an accident; I/we request the school to contact one of the following persons at the given contact number. Please include mobile numbers, if possible.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

B. In the event of my/our child becoming ill or being involved in an accident and the subsequent failure to make successful contact with one of the above I agree that my child may be brought to doctor/casualty.

**SIGNED:** \_\_\_\_\_ *(Parent/Guardian)*

\_\_\_\_\_ *(Parent/Guardian)*

**DATE:** \_\_\_\_\_

**Data Protection**

Personal data held by the school's Board of Management (*as a Data Controller*) is protected by Data Protection Acts 1988 to 2018. While the data held will generally be treated as private to St. Joseph's N.S. and will be collected and used in compliance with the aforementioned acts, from time to time it may be necessary for us to transfer your personal data on a private basis to other bodies (*eg. Department of Education & Skills, Department of Social Protection, An Garda Síochána, Health Service Executive, Tusla – Child & Family Agency, Special Education Needs Organiser, National Educational Psychological Service, or (where the student is transferring) another school*).

For further information on our data protection practices, please refer to our "Data Protection Privacy Statement for Parents, Guardians and Pupils" (*copy enclosed in this pack*) and our "Data Protection Policy" (*a copy of which is available from the school office or on our website*).

**Consent for Transfer of Data**

- If you are happy to have your child's personal data transferred on a private basis to other bodies (*as identified above*), please tick here

Parents' Signatures: \_\_\_\_\_

\_\_\_\_\_

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

## Primary Online Database



**St. Joseph's N.S.,  
Ardkill,  
Templeboy,  
Co. Sligo.  
(096) 47393**

The Department of Education and Skills has developed an electronic database of primary school pupils called the Primary Online Database (POD) which involves schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database allows the Department to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting.

The database will hold data on all primary school pupils including their PPSN, First Name, Surname, Name as per Birth Certificate, Mother's Birth Surname, Address (including Eircode), Date of Birth, Gender, Nationality, whether one of the pupil's mother tongues is English or Irish, whether the pupil is in receipt of an Exemption from Irish and if so the reason for same, and whether the pupil is in a Mainstream or Special Class. The database will record the class grouping and standard the pupil is enrolled in. The database will also contain, on an optional basis, information on the pupil's religion and on their ethnic or cultural background.

**In order to assist with the gathering of data please complete this form in CAPITAL LETTERS and return to the school.**

**Pupil Forename:** \_\_\_\_\_ **Pupil Surname:** \_\_\_\_\_

**PPSN of Pupil:** \_\_\_\_\_ **Mother's Birth Surname:** \_\_\_\_\_

**Pupil's Date of Birth:** \_\_\_\_\_ **Pupil's Gender:** Male  Female

**Birth Cert Forename** *(if different from name above):* \_\_\_\_\_

**Birth Cert Surname** *(if different from name above):* \_\_\_\_\_

**Pupil Address:** \_\_\_\_\_

\_\_\_\_\_

**County:** \_\_\_\_\_

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

**Nationality:** \_\_\_\_\_

*(In the case of dual citizenship, please specify both nationalities)*

**Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English?**

Yes  No

**Primary Online Database (Optional Information Requested)**

The Department has consulted with the Data Protection Commissioner in relation to the collection of individual pupil information for the Primary Online Database. Both religion and ethnic and cultural background are special category data under the General Data Protection Regulation (GDPR). These questions are optional. While these questions are optional, the information would be very useful to the Department for statistical and research purposes. Aggregated information on Ethnic/Cultural background will be used to track the progress of these groups, and to compare their progress with other groups, thereby identifying gaps in the system and assisting in the development and implementation of appropriate policies and interventions. Aggregated information on religion will be used for statistical purposes only. Parents/guardians are asked, if they wish to do so, to identify their children's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills.

**To which ethnic or cultural background group does your child belong (please tick one)?**

(Categories based on the Census of Population)

- White Irish                       Irish Traveller                       Roma   
Any other White Background                       Black or Black Irish - African   
Black or Black Irish - Any other Black Background                       Asian or Asian Irish – Chinese   
Asian or Asian Irish - Any other Asian background                       Other (inc. mixed background)   
No consent

**What is your child's religion?**

- Roman Catholic                       Church of Ireland (Anglican)                       Presbyterian   
Methodist, Wesleyan                       Jewish                       Muslim (Islamic)   
Orthodox (Greek, Coptic, Russian)                       Apostolic or Pentecostal                       Hindu   
Buddhist                       Jehovah's Witness                       Lutheran   
Atheist                       Baptist                       Agnostic   
Christian Religion (not further defined)                       Protestant                       Evangelical   
Other Religions                       No Religion                       No Consent

*I consent for the special category in the two questions above to be stored on the Primary Online Database (POD) and transferred to the Department of Education and Skills and any other primary schools my child may transfer to during the course of their time in primary school.*

Signed: \_\_\_\_\_

*Parent/Guardian*

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

**Please complete this form and return to your primary school.** For further information on POD please go to the Department of Education and Skills' website [www.education.ie](http://www.education.ie)