

# CASTLEBLAKENEY NATIONAL SCHOOL

Castleblakeney, Ballinasloe, Co. Galway.

Roll Number 16464I

Phone: 090-9678433

Email: [gallachns@hotmail.com](mailto:gallachns@hotmail.com) [www.castleblakeneyns.ie](http://www.castleblakeneyns.ie)

## APPLICATION FOR ENROLMENT 2023-2024

Any information you give on this form will be treated with the strictest confidence and only used for the benefit of your child. Filling in this application form does not guarantee a place at this school. Your application will not be accepted unless you enclose your child's Birth Certificate. The closing date for application is June 1<sup>st</sup> 2023 on the year of Admission.

### USE BLOCK CAPITALS PLEASE

1. Name of Child: \_\_\_\_\_ Male/Female: \_\_\_\_\_  
Birth Certificate Surname IF DIFFERENT FROM NAME ABOVE ) \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_ PLEASE ATTACH ORIGINAL BIRTH CERTIFICATE (will be returned)
3. Surname in Irish: \_\_\_\_\_

4. Name and class of siblings already in the school: \_\_\_\_\_

Number of children in the family: \_\_\_\_\_ Placing of child (1<sup>st</sup>, 2<sup>nd</sup> etc.): \_\_\_\_\_

5. PARENTS: The following information is needed for registration purposes.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

Phone No.: \_\_\_\_\_

6. Do both parents consent to the child being enrolled in Castleblakeney National School.

Yes  No

7. (b) With whom does the child normally reside: Name/s: \_\_\_\_\_

8. Home Address inc. Eircode:  
\_\_\_\_\_

9. Home Phone No.: \_\_\_\_\_

10. Mobile No. for "text-a-parent": \_\_\_\_\_

10. 1<sup>st</sup> contact person if parent not available:

Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_

- 2<sup>nd</sup> contact person if parent not available:

Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_

11. Email address(es) to which school correspondence will be sent and for purposes of online learning.

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12. How will your child normally travel to and from school?

Car  Walk

Please indicate below the name(s) and phone number(s) of the person(s) who will collect your child:

Name: Telephone No.:

Name: Telephone No.:

If the person(s) indicated above are unable to collect your child please contact the school at 090 9678433.

13. Name and address of pre-school or previous school attended: \_\_\_\_\_

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14. Phone no. of previous school: \_\_\_\_\_

I give permission to Anna Maher (Principal) to discuss the needs of my son/daughter, with the manager of the pre-school/school listed above.

Yes

No

15. Name and phone no of Family Doctor: \_\_\_\_\_

16. Has your child ever been referred to a specialist by your doctor?

If yes please give brief details for referral:

Yes

No

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17. Has your child any allergies or medical conditions?

If yes please give details:

Yes

No

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18. Does your child appear to have any difficulties with the following:

Hearing:  Yes

Speech:  Yes

Vision:  Yes

No

No

No

If you have answered yes to any/all of the above please give details:

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19. Has your child ever had any type of assessment?

Yes

No

If yes please give details:

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20. Are there any legal orders which the school should know about?

Yes

No

If yes, please give details: \_\_\_\_\_

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21. If this application is being signed by one parent only, please read and sign the following:

"I \_\_\_\_\_, confirm that both parents of \_\_\_\_\_

is aware of and consents to this enrolment application to Castleblakeney National School.

22. Sometimes the school is requested to pass on names of children and their addresses to the Health Board for immunization purposes, to secondary schools when children are transferring to second level, to sporting bodies when children are taking part in games outside the school. Do you allow the school to pass on this information to these three bodies?

Yes

No

23. The School teaches Relationships 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.

24. Do you give permission for your child to take part in Swimming lessons organised by the school?

 Yes No

The information I have given in this form is accurate.

I consent for this information 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 Education.

**For further information on POD please go to the Department of Education and Skills' website [www.education.ie](http://www.education.ie)**

**Parents/Guardians signature:**

\_\_\_\_\_

**Print Name:**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**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.**

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

Castleblakeney N.S.  
Castleblakeney, Ballinasloe,  
Co. Galway.

Pupil Information  
requested for Department of  
Education and Skills  
Primary Online Database

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. The second page of this form will be retained by Castleblakeney National School.**

Teacher/Class Name \_\_\_\_\_

**Current Standard**

Junior Infants  Senior Infants  First Class   
Second Class  Third Class  Fourth Class   
Fifth Class  Sixth Class  Special Class

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 \_\_\_\_\_

Eircode

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County \_\_\_\_\_

(See <https://finder.eircode.ie/> for 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

**Castleblakeney National School  
Castleblakeney, Ballinasloe,  
Co. Galway.**

**Pupil Information  
requested for Department of  
Education and Skills  
Primary Online Database**

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. This page of the form will be retained by Castleblakeney National School.

**To which ethnic or cultural background group does your child belong (please tick one)?  
(Categories based on the Census of Population)**

- |  |                          |                        |                          |                                       |                          |
|--|--------------------------|------------------------|--------------------------|---------------------------------------|--------------------------|
| <b>White Irish</b>                                       | <input type="checkbox"/> | <b>Irish Traveller</b> | <input type="checkbox"/> | <b>Roma</b>                           | <input type="checkbox"/> |
| <b>Any other White Background</b>                        | <input type="checkbox"/> |                        |                          | <b>Black or Black Irish - African</b> | <input type="checkbox"/> |
| <b>Black or Black Irish - Any other Black Background</b> | <input type="checkbox"/> |                        |                          | <b>Asian or Asian Irish – Chinese</b> | <input type="checkbox"/> |
| <b>Asian or Asian Irish - Any other Asian background</b> | <input type="checkbox"/> |                        |                          | <b>Other (inc. mixed background)</b>  | <input type="checkbox"/> |
| No consent   |                          |                        | <input type="checkbox"/> |                                       |                          |

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

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

*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 Castleblakeney National School.*

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

**Parent/Guardian**

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

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

## Castleblakeney National School

### **Parental Permission Form**

Each year, we ask your permission for your child to participate in certain activities. In order to cut down on unnecessary paperwork and simplify record-keeping, we have decided to include as many permissions as possible on one sheet. Please read carefully each of the items below and tick the relevant box. Not all occasions may be relevant to your child this year, but they probably will be at some stage in the future. If you have any concerns regarding any of the items below please feel free to contact the class teacher or principal.

<b>I hereby give permission for my child in relation to the following:</b>	<b>Yes</b>	<b>No</b>
Going on school tours, local educational visits/field trips and participating school activities (e.g. matches, quizzes, choir etc)		
During the school year and on occasions such as First Communion, Confirmation, Sports day, Prize-giving, etc., photos may be taken (usually group photos). In some instances children may be identified by name. These may be displayed in the school, published on the school website or local publications. This will always be with agreement and consent of the school. On very rare occasions, national media may be invited to the school to take photos/images. Best practice as stated in our "Acceptance Internet Use Policy" will always be followed. Do you agree to the school using your child's image in this way?		
I understand and agree that I, or any member of my family, will not share, on social media, photos/images of children (other than my own) taken at school events.		
Most classes have an extra support teacher assigned to help all children in the class. On occasion, it may be necessary for organisational reasons to remove a group of children to another room to work with this teacher or the class teacher. (If your child is experiencing learning difficulties you will be informed personally by the teacher). Do you agree?		
The school teaches "Stay Safe" lessons on personal safety and RSE lessons on developing and changing. Both are recommended and vetted by the Dept. of Education and Skills. You will be informed in advance if the lessons contain sensitive language. Further information is available from the school. Do you give permission for your child to participate in these lessons.		
Do you give permission for your child to be taken immediately to a doctor or hospital in case of serious illness/accident?		
On occasion we administer "Diagnostic" tests (e.g. Neale Analysis, MIST, Belfield Infant Screening, NRIT) to discover the educational progress of pupils. Should any concerns arise following these tests we will contact you. Do you agree to this?		

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

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

Parent Signature: \_\_\_\_\_

# Castleblakeney National School

## Data Protection Statement and Consent form.

A copy of the Data Protection Policy in place in Castleblakeney National School is available to view in school office. This Data Protection Policy (together with such updates and amendments as may be made to same from time to time and circulated by Castleblakeney National School) will apply during the student's time at Castleblakeney National School.

### Personal Data on this Form:

Castleblakeney National School is a data controller under the General Data Protection Regulation 2018. The personal data supplied on your child's application form for enrolment is required for the purposes of:

- student enrolment
- student registration
- allocation of teachers and resources to the school
- determining a student's eligibility for additional learning supports and transportation
- school administration
- child welfare (including medical welfare)
- and to fulfil our other legal obligations including the election of parent/guardian representatives to the Board of Management of Castleblakeney National School.

### School Contacting You

Please confirm if you are happy for us to contact you by SMS/text message and to call you on the telephone numbers provided and to send you emails for all the purposes of:

- sports days
- parent teacher meetings
- school concerts/events
- to notify you of school closure (e.g. where there are adverse weather conditions),
- to notify you of your child's non-attendance or late attendance or any other issues relating to your child's conduct in school
- to communicate with you in relation to your child's social, emotional and educational progress and to contact you in the case of an emergency.

### Tick box if "yes" you agree with these uses:

1. Use your email address to alert you to these issues?
2. Use your mobile phone number to send you SMS texts to alert you to these issues?
3. Use your mobile phone/landline number to call you to alert you to these issues?

**Please note: Castleblakeney National School reserves the right to contact you in the case of an emergency relating to your child, regardless of whether you have given your consent.**

While the information provided will generally be treated as private to Castleblakeney National School, and will be collected and used in compliance with the Data Protection Acts 1988 and 2003, from time to time it may be necessary for us to transfer your personal data to other bodies (including the Department of Education & Skills, the Department of Social Protection, An Garda Síochána, the Health Service Executive, Tusla (CFA) social workers or medical practitioners, the National Educational Welfare Board, the National Council for Special Education, any Special Education Needs Organiser, the National Educational Psychological Service, or (where the student is transferring) to another school). If we provide information to certain third parties (e.g. DES, HSE) note that this information may be released to the public and/or the press pursuant to an FOI request, where that body is a designated body under FOI.

We rely on parents/guardians and students to provide us with accurate and complete information and to update us in relation to any change in the information provided. Should you wish to update your child's personal data please notify the school in writing.

### Data Protection Consent Form:

#### Your Child(ren)'s name(s) \_\_\_\_\_

I consent to my child's data being collected, processed and used in accordance with the Data Protection Policy of Castleblakeney National School during the course of their time as a student in this school:

#### Signed:

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

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