## **CASTLEBLAKENEY NATIONAL SCHOOL**

Castleblakeney, Ballinasloe, Co. Galway. H53 Y650 Roll Number 16464I

Phone: 090-9678433 Email: gallachns@hotmail.com www.castleblakeneyns.ie

# **APPLICATION FOR ENROLMENT 2025-2026**

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 May 30th 2025 on the year of Admission.

### USE BLOCK CAPITALS PLEASE

1.	Name of Child:	Male/Female:			
		ME ABOVE )			
2.	Date of Birth:				
	Surname in Irish:				
4.	Name and class of siblings already in the so	chool:			
	Number of children in the family:	Placing of child (1st 2nd etc.):			
5.	Number of children in the family: Placing of child (1 <sup>st</sup> , 2 <sup>nd</sup> etc.): PARENTS: The following information is needed for registration purposes.				
	Name:	Name:			
	Occupation:	Occupation:			
	Nationality:	Nationality:			
	Phone No.:	Phone No.:			
5.	Do both parents consent to the child being Yes □ No □	enrolled in Castleblakeney National School.			
	(b) With whom does the child normally res Home Address inc. Eircode:	side: Name/s:			
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 co	rrespondence v	will be sent o	e.g. newslet	tters, online le	earning etc.
12.	How will your ch	nild normally travel Walk		hool?			
	Please indicate below the name(s) and phone number(s) of the person(s) who will collect your child:						
	Name:		Telephone No	o.:			
	Name:		Telephone No	o.:			
	If the person(s) indicated above are unable to collect your child please contact the school at 090 9678433.					ol at 090	
13.	Name and address	ss of pre-school or p	orevious school	attended:			
14.	Phone no. of prev	vious school:					
	ive permission to the pre-school/sch	Anna Maher (Princi					the manager
15.	Name and phone	no of Family Docto	or:				
16.	•	ver been referred to brief details for ref		your doctor	? Yes	No	
17.	Has your child ar If yes please give	ny allergies or medi e details:	cal conditions?	•	Yes	No	

	Hearing:	Yes	Speech:	Yes	Vision:	Yes	
	If you have	No answered yes to	o any/all of the abov	No ve please give o	letails:	No	
	Has your child ever had any type of assessment?  Yes  No  No						
20.	Are there a	ny legal orders	which the school sh	ould know abo	ut?		
	If yes, plea	se give details:_					· · · · · · · · · · · · · · · · · · ·
21.	If this appli	ication is being	signed by one paren	nt only, please r	ead and sign t	he following	
			, confirm that 1		_		
			s enrolment application				
Boa spo	ard for imm rting bodies	unization purpo s when children	quested to pass on r ses, to secondary so are taking part in ga se three bodies?	hools when chi	ldren are trans	ferring to see	cond level, to

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

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				
HSE Information needed By law, schools will be asked to share the following information with the HSE: • your child's name, address, date of birth and sex • mother's birth surname • contact details for parent/guardian (including name, phone number and email address) • the child's personal public service (PPS) number, if any • the school's name and roll number				
This information allows school public health nurses to plan their visit to the school. They can also follow up with families who do not return consent forms, providing additional support and information to make sure children do not miss out. This helps to make sure the programme reaches as many children as possible.				
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. H53 Y650

# 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				
County  (See https://finder.eircode.ie/ for Eirc	ode)			
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. H53 Y650

Department of Education and Skills' website www.education.ie

# 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) ☐ Irish Traveller White Irish 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 Muslim (Islamic) Methodist, Wesleyan Jewish 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 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

# 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.

I hereby give permission for my child in relation to the following:	Yes	No
Going on school tours, local educational visits/field trips and participating school		i
activities (e.g. matches, quizzes, choir etc)		
During the school year and on occasions such as First Communion,		i
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, social media 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?		
		<u> </u>
Name of Childs		
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 "ves" you agree with these uses:

<u> 110</u>	K DOX II	yes <u></u>	you agree with these uses.	
1.	Use your	em	ail address to alert you to these issues?	
2.	Use your	mo	oile phone number to send you SMS texts to alert you to these issues?	
3.	Use your	mo	oile 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 bei	ng collected, processed and used in accordance with	the Data Protection Policy of
•	during the course of their time as a student in this so	•
Signed:	( Parent/Guardian)	( Parent/Guardian)
Date:		