St. Patrick's Infants N.S., Gardiners Hills, Cork. Tel 021 4551593



Scoil Phádraig Naofa (Naionáin), Cnoc Ghairdnéir, Corcaigh.

Registration Form

Please return the completed form (**in BLOCK CAPITALS**) accompanied by your child's <u>Original Birth Certificate</u> and any Relevant Reports to the school which will be copied and kept on file. Any information you give on this form will be treated in the strictest of confidence.

Child's Full Name:			Proposed year of enrolment: e.g. Sept 2015/2016/2017 etc		
PPS No:			Dat	Date of birth:	
Home address:					
				Religion:	
Nationality:				Parish in which he/she now lives:	
Year of arrival in Ireland if born outside the state:					
Ethnic or Cultural Background:					
Mother's name/ Address:		Mother's Nationality:		y:	Present occupation:
Mothers Mobile No:					
Father's name / Address:		Fathers Nationality:			Present occupation :
Fathers Mobile No:					
Male/Female?	Number of boys in family	7	Number of girls		Position of child (1 st , 2 nd ,3 rd etc)
Preschool and name of same:			Previous School (if any) and name of same:		
			Class:		
Is English your child's first spoken at home below	No _] If N	lo please list languages		

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Has your child ever been ref	erred to / attended the following serv	vices?				
Speech and Language	Yes No D					
Occupational Therapy	Yes 🔲 No 🗓					
Early Intervention	Yes No					
Paediatric Services	Yes No					
If yes to any of the above please give details of service i.e. Therapist/Consultant Name along with a copy of any reports or referrals received.						
Give details of any health condition e.g. Physical/Emotional/Behavioural problems/ allergies which may affect your child in school.						
Name, address and phone number of Family Doctor:						
In case of an accident or an emergency do you consent to the local doctor / or a Certified Staff Member to administer First Aid? Yes No						
Are you a Medical Card Holder? Yes No						
Are you a Medical Card Hol	lder? Yes No					
In case your child should be	come ill and there is no one at home.					
In case your child should be						
In case your child should be name/address/phone number	come ill and there is no one at home.	r family we could contact.				
In case your child should be name/address/phone number Name of contact person:	come ill and there is no one at home, of 2 neighbours or members of you	r family we could contact.				
In case your child should be name/address/phone number Name of contact person: Address:	come ill and there is no one at home, of 2 neighbours or members of you	r family we could contact. Telephone:				
In case your child should be name/address/phone number Name of contact person: Address: Name of second contact person Address:	come ill and there is no one at home, of 2 neighbours or members of you	r family we could contact. Telephone: Telephone:				
In case your child should be name/address/phone number Name of contact person: Address: Name of second contact person Address:	come ill and there is no one at home, of 2 neighbours or members of you son:	Telephone: Telephone: School:				
In case your child should be name/address/phone number Name of contact person: Address: Name of second contact person Address: Name of persons who have perso	come ill and there is no one at home, of 2 neighbours or members of you son:	Telephone: Telephone: School:				
In case your child should be name/address/phone number Name of contact person: Address: Name of second contact person Address: Name of persons who have persons who have person is the	come ill and there is no one at home, of 2 neighbours or members of you son: permission to collect your child after ngements other than the above a note	Telephone: Telephone: School:				

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Internet Access (in a class situation under the supervision of the class teacher)					
My child's image (in a group setting)/ art work etc. to appear on the school website/press photos					
Participation of my child in educational trips and tours.					
In the event of an emergency, parents/guardians will be contacted by phone. If immediate contact is not made the teacher will assume the right to authorise emergency treatment.					
 I give permission to Saint Patrick's Infants N.S. to: Contact my child's preschool(s)/previous school(s) Contact other agencies and services e.g. school psychologist, medical services Administer screening tests to my child in Junior Infants (Belfield) and in Senior Infants (MIST) Support my child in small group settings in class, by members of the SEN team 					
Should further diagnostic testing and/or further support (Learning Support/Resource Teaching, English Language Support, Schools Completion Programme, Maths Recovery) be required written consent will be requested from you.					
Occasionally the school psychologist (NEPS) and/or other services may be contacted by the school. Teachers may wish to seek advice on issues around your child's educational progress or other matters (behaviour etc.). Should further involvement of these services be necessary you will be contacted and your written consent will be requested by the school.					
It is compulsory under DES guidelines that every school participates in the Relationships and Sexuality Education programme and STAY SAFE programme in the context of Social Personal and Health Education. If you wish to review these programmes please contact your child's class teacher and further information will be provided.					
School Attendance Under the Education Welfare Act (2000) you must make sure that your child attends school regularly. When your child is absent from school for any reason you must notify the school of the reasons for the absence. The National Education Welfare Board (NEWB) is responsible for promoting and monitoring school attendance. The school must inform the NEWB when a pupil is absent for more than 20 days in a school year or when a pupil is not attending regularly. In cases of serious non-attendance an Education Welfare Officer will make all reasonable efforts to ensure regular school attendance.					
The NEWB has produced a leaflet for parents entitled <i>Don't let your child miss out (on a good start in life!</i>). It is available to download from www.newb.ie					
The above information is true to the best of my knowledge. I am aware that it may be stored on computer. A full copy of the school's Code of Behaviour and Policies is available for viewing in reception and on the Schools Website I and my child/children agree to abide by the school's code of Behaviour.					
Signed:(Parent/Guardian)					
(Parent/Guardian) Date:					
Mobile Number for Text a Parent System: Email address for communication between school					

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and parents: