

Enrolment Acceptance Form

Scoil Bhride, Kilbride, Clonee Co. Meath

Class:

Date:

Date: _____

Child's Forename: _____ Surname (as on Birth Cert): _____

Home Address:

Request for Additional Resources if Applicable

In order to apply for additional resources for your child, please supply the following confidential information:

Has your child ever had an assessment with any of the following?

- | | | | | |
|---|------|--------------------------|-----|--------------------------|
| (a) A Psychologist | Yes: | <input type="checkbox"/> | No: | <input type="checkbox"/> |
| (b) A Speech & Language Therapist | Yes: | <input type="checkbox"/> | No: | <input type="checkbox"/> |
| (c) An Occupational Therapist | Yes: | <input type="checkbox"/> | No: | <input type="checkbox"/> |
| (d) Does your child have a medical, disability? | Yes: | <input type="checkbox"/> | No: | <input type="checkbox"/> |
| (e) Does your child have a physical disability? | Yes: | <input type="checkbox"/> | No: | <input type="checkbox"/> |
| (f) Does your child have an emotional disability? | Yes: | <input type="checkbox"/> | No: | <input type="checkbox"/> |
| (g) Other (<i>Please Specifiy</i>) _____ | | | | |

If you have ticked yes to any of the above, please make contact with the Principal to **schedule an appointment**.

Emergency Contact Details

*In the event of an emergency where Parents/Guardians cannot be contactd please give details of at least **two other persons** who can be contacted:*

1. Name: _____ Mobile Phone _____

2. Name: _____ Mobile Phone No: _____

3. Name: _____ Mobile Phone No: _____

Policy Documents

You should become familiar with the following policy documents, which are available on the school's website at www.scoilbhridents.ie or in hard copy on request from the school:

- Enrolment & Admission Policy
- Code of Behaviour
- Child Protection Policy
- Relationship & Sexuality Education Policy
- Health and Safety Statement
- Internet Usage Policy

Consent

We/I consent to the school submitting school photographs to local or national media, [names of children will not be submitted] Yes: No:

We/I consent to the school including my child in group photographs Yes: No:

We the undersigned, confirm that the information supplied is correct; that we are aware that the data outlined above will be kept on file in the school in compliance with Data Protection Legislation.

We accept the offer of enrolment of our child/ren in Scoil Bhríde.

Signature of Parents / Guardians:

Signed: _____

Date: _____

Signed: _____

Date: _____