Please use block capitals

Tel: 01 668 1155
Email: office@scps.ie
Web: www.scps.ie

Principal: Íde Tynan

St. Christopher's Primary School
Haddington Road
Ballsbridge
Dublin
D04 FP20

APPLICATION FOR ENROLMENT – SPECIAL CLASS FOR AUTISM

Our Mission - to provide an appropriate, stimulating and broadly challenging education for all of our pupils in a happy and secure learning environment. We promote respect for diversity, environmental awareness and an appreciation of our global community.

CHILD'S INFORMATION

First Name:..... Surname: .....

PPS Number: ..... Date of Birth: .....

Address: ..... Nationality: .....

..... Date of arrival in Ireland (*if relevant*) .....

..... Male ◯ Female ◯

Eircode: ..... Mother's Maiden Name: .....

Have you children already attending this school? Yes ◯ No ◯

Have you younger children to enroll in the future? Yes ◯ No ◯

Name: ..... Date of Birth .....

Name: ..... Date of Birth .....

What is your child's first language? .....

Are there any other languages spoken at home? .....

Relevant Health/Medical information (*including allergies*):

.....

.....

.....

Office use only:
Application for enrolment received on: _____ *Acknowledged:* ◯ *Birth Cert received:* ◯ *Aladdin:* ◯

PARENTAL INFORMATION

Parent 1/Guardian Name:.....

Address: .....
(If different from overleaf)
.....

Mobile No: .....

Home No: .....

Email: .....

Parent 2/Guardian Name: .....

Address: .....
(If different from overleaf)
.....

Mobile No: .....

Home No: .....

Email: .....

Contact in **'Case of Emergency'** (in the event parents cannot be contacted)

Name: .....

Contact No: .....

PRESCHOOL/PREVIOUS SCHOOL INFORMATION

Name & address of previous school/preschool .....

.....

.....

OTHER RELEVANT INFORMATION

Has your child attended any of the following services?

- Speech and Language Therapy Yes ◯ No ◯
- Occupational Therapy Yes ◯ No ◯
- Psychology Yes ◯ No ◯
- Hearing/Vision Services Yes ◯ No ◯

If you have answered yes to any of the above please give details.

.....

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.....

Professional reports, if available, should accompany this application.

To which ethnic or cultural background group does your child belong?

This information is requested by the Department of Education for the Primary Online Database (POD). If you do not consent to this information being shared please tick the 'No Consent' button.

Please tick one of the following:

◯ 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 – Indian/Pakistani/Bangladeshi ◯ Asian or Asian Irish – any other Asian background

◯ Other (*incl. mix background*) Arab ◯ Other (*incl. mix background*) – all others ◯ No Consent

WHAT IS YOUR CHILD'S RELIGION?

This information is requested by the Department of Education for the Primary Online Database (POD). If you do not consent to this information being shared please tick the 'No Consent' button.

◯ Roman Catholic ◯ Church of Ireland (incl. Protestant) ◯ Presbyterian ◯ Methodist, Wesleyan

◯ Jewish ◯ Muslim (Islamic) ◯ Orthodox ◯ Apostolic or Pentecostal ◯ Hindu

◯ Buddhist ◯ Jehovah's Witness ◯ Lutheran ◯ Baptist ◯ Other Religion

◯ No Religion ◯ No Consent

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.

Signed: ..... Date: .....
Parent/Guardian

For further information on POD please go to the Department of Education and Skills www.education.ie

THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS FORM

Birth certificate ◯
Proof of current residence (*e.g. recent ESB, Gas Bill*) ◯
Baptismal certificate (*if Roman Catholic*) ◯
Professional reports ◯
Latest report from current school (*if relevant*) ◯
NCSE letter of 'Confirmation of Eligibility' ◯

Please tick documents supplied.

PARENTAL CONSENT

Medical Emergencies

During the course of the school day children can have accidents and cut or bump themselves. I give permission for my child to receive any first aid deemed necessary and to be taken to hospital in case of serious illness or accident. (We will always try to contact parents first). Yes ◯ No ◯

School Website/Publications

I give consent for the use of school related photographic images which include my child on the school website or in other school publications or displays. I understand that she/he will not be identified individually. Yes ◯ No ◯

Activities Outside/After School

During the school year classes may undertake activities outside the school premises e.g. visiting the local library, park etc. I consent that my child may do so. Yes ◯ No ◯

Digital Technology

I give consent for my child to use the computers in the school in line with the school's AUP (Acceptable Use Policy) and for child to use Class Dojo/Google Classroom to store their work. Yes ◯ No ◯

- I/we are aware that the school policies including policies on Code of Behaviour, Anti-Bullying, Child Protection etc. are available on request from the office or from the school website www.spcs.ie
- In signing this application for enrolment, I/we agree to support the Board of Management and staff in their implementation of school policies.
- I/we are aware that the Stay Safe Programme (*Personal Safety Skills*) & RSE (*Relationships & Sexuality Education*) are taught as part of our SPHE curriculum.
- I/we are aware that the data relating to this application will be retained in the school and that the school uses a secure management system, Aladdin, to manage information relating to pupil data (e.g. contact details, attendance) and that in making this application I/we are consenting to its usage. Further information can be found on www.aladdin.ie.
- I/we agree to support the staff in their efforts to provide a positive learning experience for all the children in the school.

Signed: ..... Date: .....
(Parent 1/Guardian)

Signed: ..... Date: .....
(Parent 2/Guardian)

Please note: Incomplete applications will not be considered