Scoil Bríde

# Cabán tSíle

Atha Cliath 18, D18 TN66

Principal: Elaine Carroll Roll No. 16353W

St. Brigid’s Girls’ School The Park, Cabinteely Dublin 18, D18 TN66

Tel: 284 7422

**

Fax: 235 0137

Email: secretary@stbrigidsgirlsschool.com

**Application to Enrol Senior Infants to 6th Class**

**Enrolment will be assessed in accordance with the Admission Policy in place at the time of application.**

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| Surname: | Name: | Date of Birth: |
| PPS Number: | Religion:(if applicable) | Parish of Residence: | Nationality: |
| Home Address: |
| Eircode: | Home Phone No: |
| Parent’s/Guardian’s Name:Mother’s maiden name: | Parent’s/Guardian’s Name: |
| Mobile No: | Mobile No: |
| Email: | Email: |
| Occupation: | Occupation: |
| Work Phone No: | Work Phone No: |
| Work Address: | Work Address: |
| Sister in St. Brigid’s GNS | Y/N | Name: | Class: | Teacher: |
| Brother in St. Brigid’s BNS | Y/N | Name: | Class: | Teacher: |
| Schools attended prior to enrolling in St. Brigid’s Girls’ School: |
| Name of current school: | Telephone no: |
| Address: |
| Reason for Transfer: |
| Current class level: |
| Please give details of any matters in your child’s health or medical history which may affect her educational progress or require any special attention while in our care (e.g. asthma, allergies, any special needs etc.) |
| If there is any other information about your child that you think the school should be aware of please give details here: |
| **Alternative Contact Details** |
| Please provide contact details of a LOCAL neighbour or relative who will take responsibility for your child in the event of illness or emergency and parents cannot be contacted:(By providing these contact details, the parties involved, consent to St. Brigid’s Girls’ School holding their personal details in compliance with GDPR) |
| Name: | Relationship to Child:(must be over 16 years of age) | Address: | Phone: |
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| Do you consent to the school contacting your Doctor in the case of an emergency? Y/N |
| Doctor’s Name: | Telephone Number: | Address: |
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| Is one of the pupil’s mother tongues (i.e.) language spoken at home English or Irish? Y/N |

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| **For your information:**In accordance with our Admissions Policy please enclose all supporting documentation with this Application Form.Please see our school website [www.stbrigidsgirlsschool.com](http://www.stbrigidsgirlsschool.com) for full policy.1. The completed Application to Enrol Form.
2. A photocopy of your daughter’s Birth Certificate.
3. An original Gas or Electricity Bill in the name of either or both parents/guardians, dated within three months of the acceptance date. A print out of an online bill must be signed by one parent/guardian.

AndAny one of the following, in the name of either or both parents/guardians, dated within six months of the acceptance date:1. An original Tenancy Agreement or Local Property Tax Bill
2. An original document issued by the Government Department e.g. Revenue, Social Welfare
3. An original valid TV licence
4. Completed Enrolment Consent Form (page 4)

It is the responsibility of the parents/guardians to ensure that all information is correct at the time of application. Please check all information before submitting.Applications should be submitted in hard copy as original documents are required (not scanned versions).Please post your application to:*St. Brigid’s Girls’ National School,**Park Drive,**Cabinteely,**Dublin 18.**D18 TN66*A SAE (stamped address envelope) should be included for return of original documents. |
| **Signature of parent/guardian:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signature of parent/guardian:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Date:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Date:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **School Policies:**I/We agree on behalf of my/our child to sign up to the school’s policies (available to read on the school website [www.stbrigidsgirlsschool.com](http://www.stbrigidsgirlsschool.com) including but not limited to;* Code of Behaviour
* Acceptable Use of the Internet Policy
* Anti-Bullying Policy

I/We understand that during my daughter’s time in St. Brigid’s Girls’ School, it may be necessary from time to time for teachers to carry out educational diagnostic tests with my child on an individual basis, in order to help them in their educational development. Parents will be informed of the results of these tests. |
| **Signature of parent/guardian:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Signature of parent/guardian:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Date:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Offers of places are made based on the information supplied and in accordance with our school Admission Policy.****Please complete all sections of this form and include all requested items.****Incomplete applications will not be considered.**We will only retain personal information for as long as is necessary to fulfil the purpose the information was collected for, including any legal, accounting, or reporting requirements. Please see the school website for our Data Protection Privacy Statement for Parents, Guardians, and Students. |

**Enrolment Consent Form**

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| **Please read each statement carefully and tick Yes or No as appropriate** | **Yes** | **No** |
| 1. | I consent to the school holding relevant and necessary personal and educational data on my child in electronic and written format.I understand that such electronic and written records/data will be used exclusively for the legitimate educational provision for my child while in St. Brigid’s Girl’s School for communication between home and school, the Department of Education and Skills, the National Education Welfare Board (NEWB) and other statutory agencies. The platforms for the storing of electronic data include but are not limited to the Aladdin Schools Administration system and the school domain. Further information can be found on our Data Protection Policy on www.stbrigidsgirlsschool.com |  |  |
| 2. | Parents, who take photos of their daughters, where other pupils in the school appear in the photo / video, may not upload these photos / videos to any social media website. Parents do not have permission to publish photos / videos which include other people’s children. They must be kept for private viewing only. I understand and will support this policy. |  |  |
| 3. | My child may use electronic email and the internet for educational purposes, subject to the Acceptable Use Policy (AUP) of the school. |  |  |
| 4.  | I consent to the school registering my child’s name and a parent email address to Seesaw or Google Classroom, the school’s online learning platforms. Images/videos of my child engaging in school activities may be uploaded to Seesaw or Google Classroom and shared with the families in her class. The photos/videos are for family viewing only and should not be shared to any social media platform or whatsapp group. We request that they remain on the platform and are not downloaded from it. |  |  |
| 5. | My child may participate in school outings, short walks, visits to Church as part of Sacramental preparation, trips to sports field for P.E, simple fieldtrips and trails around the school and local area, under the supervision of the teachers and fully vetted staff. |  |  |
| 6. | In the event of my child transferring to another school, I consent to the forwarding of all school reports and other relevant reports / information to my child’s new school. |  |  |
| 7. | The school encourages a healthy eating policy. Children should have a nourishing lunch. They should not bring sweets, chocolate, crisps or fizzy drinks to school. Chewing gum is never allowed. I will support this healthy eating policy. |  |  |
| 8. | My child may be included in school photographs / DVDs which may appear around the school premises, or on the school website, and in which no identifying information shall be supplied e.g. full names, addresses. These include pictures of children with projects/educational demonstrations and class work display.  |  |  |
| 8. | I consent to the school supplying my child’s details to the relevant Health Authorities where such information relates to providing dental care, immunisation and/or other health care normally provided through the school. |  |  |
| 9. | In the case of a medical emergency, I give permission for my child to be taken to hospital by ambulance, if such action is required and parents cannot be contacted. |  |  |

Child’s Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Names (Print):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **For Office Use Only**Date Application Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Receipt Issued by email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |