



Clondrohid National School

Clondrohid

Macroon

Co Cork

Tel: 026 61800

email: clondrohid@gmail.com

www.clondrohidns.ie

Roll No: 14839P

Postal Code P12KN66

ENROLMENT FORM

REQUESTED YEAR OF ENROLMENT _____

Child's Name			
Address & Eircode			
Date of Birth			
Child's P.P.S. No.			
Nationality			
Place in Family	Siblings in school		
Home Telephone Number			
Mobile Numbers		1 (Mother)	
		2 (Father)	
Email :			
Alternative contact numbers in case of no reply at above (state names please)		1	
		2	
Parents Names			
Father's occupation			
Mother's occupation			
Email address			
Previous school and class/playschool (if applicable)			
Any medical problems/allergy problems that school should be aware of ?			
Has your child ever had a psychological assessment? (If so, please attach relevant reports)			
Has your child experienced speech difficulties?			
Has your child experienced hearing difficulties?			
Does your child have any difficulties with vision?			

Confidential Information For School Database Only

<i>Does your child have any issues socially or behaviourally that the school should know about? If so, please give details</i>	
<i>Name of Family Doctor, Address & Telephone Number:</i>	
<i>Has school permission to remove the child directly to a doctor/hospital should an emergency arise?</i>	

What is your Child's Religion?

<i>Roman Catholic</i>	<i>Church of Ireland (incl. Protestant)</i>	<i>Presbyterian</i>	<i>Methodist, Wesleyan</i>	
<i>Jewish</i>	<i>Muslim (Islamic)</i>	<i>Orthodox (Greek, Coptic, Russian)</i>	<i>Apostolic or Pentecostal</i>	
<i>Hindu</i>	<i>Buddhist</i>	<i>Jehovah's Witness</i>	<i>Lutheran</i>	
<i>Atheist</i>	<i>Baptist</i>	<i>Agnostic</i>	<i>Other Religions</i>	
<i>No Religion</i>	<i>No Consent</i>			

<i>To which ethnic or cultural background group does your child belong (please Tick one)? (Categories based on the Census of Population)</i>	<input type="checkbox"/> <i>White Irish</i> <input type="checkbox"/> <i>Irish Traveller</i> <input type="checkbox"/> <i>Roma</i> <input type="checkbox"/> <i>Any other White Background</i> <input type="checkbox"/> <i>Black or Black Irish - African</i>	<input type="checkbox"/> <i>Black or Black Irish - Any other Black Background</i> <input type="checkbox"/> <i>Asian or Asian Irish - Chinese</i> <input type="checkbox"/> <i>Asian or Asian Irish - Any other Asian background</i> <input type="checkbox"/> <i>Other (incl. mixed background)</i>
<i>Is the language spoken at home Irish or English?</i>		
<i>Any further information</i>		

I consent for the sensitive personal data in the two previous questions 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: _____

Please forward, a copy of your child's birth certificate.

School should be informed of any changes to the information contained in this enrolment form.