



# Maynooth Boys' National School Enrolment Form



**Class Enrolling For:** \_\_\_\_\_ **Proposed Commencement Date:** \_\_\_\_\_

**Child's Details:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

2 forms of proof of address must be provided (e.g. utility bill, bank statement, correspondence from State/Govt Dept)

Eircode \_\_\_\_\_ PPSN No. \_\_\_\_\_ DOB \_\_\_\_\_

Nationality \_\_\_\_\_ Religion \_\_\_\_\_ Previous school/Classes (if any): \_\_\_\_\_

Home Phone No. \_\_\_\_\_

**Parents/Guardian's Information:**

**Mother/Legal Guardian:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Mobile No. \_\_\_\_\_ Work No. \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

Address \_\_\_\_\_ (If different from above)

E-Mail (print clearly) \_\_\_\_\_

**Father/Legal Guardian:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Mobile No. \_\_\_\_\_ Work No. \_\_\_\_\_

Address \_\_\_\_\_ (If different from above)

E-Mail (print clearly) \_\_\_\_\_

With whom does the child normally live? Both Parents  Mother  Father  Other \_\_\_\_\_

**Text-a-Parent Mobile No.** \_\_\_\_\_  
Please nominate which contact number for the text a parent service (for day-to-day school communication and notices)

**In the event that neither parent/guardian is contactable, either of the following can be contacted:**

(Please provide a minimum of 2 additional non-parent contacts, ideally this should be someone who lives in or nearby the Maynooth area)

Emergency Contact details	Contact 1	Contact 2
Name		
Relationship		
Phone Number		

Siblings currently in school in Maynooth BNS/Presentation GNS				
Name	1.	2.	3.	4.
Class				

**Additional Information:**

Has your child attended Pre-school/Montessori?

Yes  No

If Yes, please enter name of Pre-school/Montessori attended \_\_\_\_\_

Does your child have any additional needs that the school should be aware of? Yes  No

***Professional reports must be provided. Information supplied will not be used in the enrolment decision-making process but will allow for the allocation of resources to meet pupil needs.***

Please tick the appropriate category/categories and provide details:

Physical  Hearing/Vision Impairment  Emotional/Behavioural  Educational

Autism Spectrum  Speech and Language  Medical  Other

Details of additional needs:

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**Previous Primary School attended (Applications for Senior Infants to 6<sup>th</sup> Class only):**

Name \_\_\_\_\_ Address \_\_\_\_\_

Roll Number \_\_\_\_\_ School Telephone No. \_\_\_\_\_ Principal's Name \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Current class(es) \_\_\_\_\_

Reason for leaving this school \_\_\_\_\_

Is/was your child in receipt of any of the following additional supports?

Support/Resource Teaching  English Language Support (EAL)  Special Needs Assistant

If you have answered Yes to any of the above, please give details of the support received:

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***Please attach copies of the two most recent school reports and any other relevant records from previous school(s). School reports will not be used in the enrolment decision-making process.***

***Please ensure that you have completed all sections of the application form and attach the original of your son's Birth Certificate, Baptismal Certificate (if Catholic), 2 proof of address documents and any professional/assessments/reports.***

The Department of Education & Skills has developed an electronic database for Primary Schools. This will give the Department access to information that will enable it to provide grants and resources to schools and to plan for future provision in specific areas. The DES require a small amount of information to fully register your child on the Primary Online Database (POD). Could you please complete the form below.

**Pupil First Name** \_\_\_\_\_ **Pupil Surname** \_\_\_\_\_

**Address** \_\_\_\_\_

**Class** \_\_\_\_\_

<i>Please tick just <u>one</u> box below</i>	↓
<b>Ethnic or Cultural Background</b>	
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 – Any other Asian Background	
Other (inc. Mixed Background)	

*I do not wish to share this information with the DES*

<i>Please tick just <u>one</u> box below</i>	↓
<b>Pupil Origin (before this school)</b>	
Childcare Setting - Pre-Primary Education/Early Start Programme	
Another Mainstream National Sch.	
Special School in Ireland	
Private Primary School (Ireland)	
School in Northern Ireland	
School abroad	
Home - Not in any school	
Other	

<i>Please tick just <u>one</u> box below</i>	↓
<b>Religion</b>	
Roman Catholic	
Church of Ireland (Anglican)	
Presbyterian	
Methodist, Wesleyan	
Jewish	
Muslim (Islamic)	
Orthodox (Greek, Coptic, Russian)	
Apostolic or Pentecostal	
Hindu	
Buddhist	
Jehovah's Witness	
Lutheran	
Atheist	
Baptist	
Agnostic	
Other Religions	
No Religion	

*I do not wish to share this information with the DES*

Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English?  Yes  No

Language spoken at home if not Irish or English

*I consent for this information to be stored on the Primary Online Database (POD) and transferred to the Department of Education & Skills and any other primary schools my child may transfer to during the course of their time in primary school.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Parents' Checklist for Enrolment</b>	
Fully Completed Application Form above	<input type="checkbox"/>
Birth Certificate <input type="checkbox"/> Baptismal Certificate (If R.C.)	<input type="checkbox"/>
Proof of Address (2) <input type="checkbox"/> School Reports	<input type="checkbox"/>
Other relevant reports	<input type="checkbox"/>