



Holy Spirit Girls' National School

STUDENT DETAILS

Child's Name:		Date of Birth:	
Address:		Country of Birth / Nationality:	
		Number of years living in Ireland (if not born here):	
		P.P.S. Number:	

SIBLING DETAILS

Number of children in family:		Siblings already in this school:	
Child's place in family:		Siblings applying this year also:	

PARENT DETAILS

PARENT 1		PARENT 2	
Name:			
Address:			
Country of Birth:			
Occupation:			
Home Phone:			
Work Phone:			
Mobile Phone:			
E-mail:			

EMERGENCY CONTACT DETAILS

CONTACT 1		CONTACT 2	
Name:			
Phone Number:			
Relationship to child:			
Family Doctor:		Address:	

PRE SCHOOL DETAILS (If applicable)

Name of pre-school:			
Dates attended :	From:		To:

PREVIOUS PRIMARY SCHOOL DETAILS (If applicable)

Name of school:			
Address:			

ADDITIONAL DETAILS (Tick where relevant):

Are there any family/ legal issues that the school should be aware of? <small>(Please supply any relevant paper work)</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you wish to have separate Parent Teacher meetings? <small>(The school will comply with current legislation regarding notice of parent/ teacher meetings and academic reports and permissions. It is the responsibility of parents to inform school in writing of any desired changes in their circumstances which might affect this)</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has your child any special talents?		
Does your child have any medical conditions/allergies? <small>(if yes, please describe briefly)</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Signature of Parent/Guardian: _____

Date: _____

Signature of Parent/Guardian: _____

Date: _____



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Ethos statement of Holy Spirit G.N.S:

Holy Spirit G.N.S is under the Patronage of Archbishop of Dublin and religious instruction is in accordance with the Roman Catholic Faith.

PARENTAL CONSENTS

To avoid seeking the following consents each year the Board of Management has decided to seek them at enrolment for action throughout the child's time in our school

I/We give permission to the school, in the event of an emergency, to contact the emergency services prior to making contact with me or with the emergency numbers provided.	Please initial
I/We give permission for my/our child to be brought and treated in hospital in the case of an emergency.	Please initial
I/We consent to my/our child being assessed if necessary with a view to provide extra Learning Support if available.	Please initial
I/We give permission to the school to treat minor injuries with the use of water, antiseptic wipes and icepacks.	Please initial
I/We consent to Holy Spirit G.N.S. accessing all educational reports from your child's previous primary school.	Please initial
I/We give permission to the school to use my/our child's schoolwork/photograph for inclusion on the school website and, on occasion, to be featured in the news coverage: T.V., radio and newspapers.	Please initial
I/We give permission to the school for my/our child to go on educational trips outside the school grounds.	Please initial
I/We give permission to the school for my/our child to access the internet for educational purposes, in line with our Acceptable User Policy.	Please initial
I/We give permission for my/our child to participate in the R.S.E. (Relationships & Sexual Education) programmes as recommended by the D.E.S. and implemented by Holy Spirit G.N.S.	Please initial
I/We agree to my/our child's participation in Holy Spirit G.N.S. Book Rental Scheme	Please initial

NOTES:

- The Parental Consents Form will remain in place for the duration of your child's enrolment in Holy Spirit G.N.S. unless written notice to the contrary is supplied to the school Principal.
- All information sought above will be treated in compliance with Data Protection Policy Holy Spirit G.N.S.
- No information on any pupil will be passed on to second level schools prior to agreement to enrolment by that school.
- P.P.S. number must be provided to comply with DES requirements.
- Holy Spirit G.N.S. may seek to confirm any of the details provided on this form.

Please read the School Admissions Policy, Child Protection Policy, Code of Good Behaviour, Anti-Bullying (including Cyber Bullying) Policy and Data Protection Policy on our website.

A hard copy of each policy is available from the secretary's office.

I have read the policies including the Ethos Statement of School and agree to comply with the conditions contained therein.

Signature of Parent/Guardian: _____

Date: _____

Signature of Parent/Guardian: _____

Date: _____



Holy Spirit Girls' National School

Dear Parent,

The Department of Education and Skills is developing an electronic database of primary school pupils called the Primary Online Database (POD) which will involve schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database will allow the Department to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting.

The database will hold data on all primary school pupils including their PPSN, First Name, Surname, Name as per Birth Certificate, Mother's Maiden Name, Address, Date of Birth, Gender, Nationality, whether one of the pupil's mother tongues is English or Irish, whether the pupil is in receipt of an Exemption from Irish and if so the reason for same, whether the pupil is in receipt of Learning Support and if so the type of learning support, whether the pupil is in a Mainstream or Special Class. The database will record the class grouping and standard the pupil is enrolled in. The database will also contain, on an optional basis, information on the pupil's religion and on their ethnic or cultural background.

In order to assist with the gathering of data please complete this form in CAPITAL LETTERS and return to the school. This form will be retained by the primary school.

Pupil Forename : _____ **Pupil Surname:** _____ **Class:** _____

Address: _____ **Date of Birth:** _____

PPS Number: _____ **Mothers Maiden name:** _____

Nationality: _____ **Gender:** _____

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

The Department has consulted with the Data Protection Commissioner in relation to the collection of individual pupil information for the Primary Online Database. Both religion and ethnic and cultural background are considered sensitive personal data categories under Data Protection legislation. Therefore, it is necessary for each pupil's parent/guardian to identify their child's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills. All other information held on POD was deemed by the Data Protection Commissioner as non-sensitive personal data.

To which ethnic or cultural background group does your child belong (please tick one):

Categories are taken from the Census of Population:

- | | | | | |
|---|--|---|--|--|
| <input type="checkbox"/> White Irish | <input type="checkbox"/> Irish Traveller | <input type="checkbox"/> Roma | <input type="checkbox"/> Any other White Background | <input type="checkbox"/> Black African |
| <input type="checkbox"/> Any other Black Background | <input type="checkbox"/> Chinese | <input type="checkbox"/> Any other Asian background | <input type="checkbox"/> Other (inc. mixed background) | <input type="checkbox"/> No Consent |

What is your child's Religion:

- | | | | | |
|---|---|---|--|-----------------------------------|
| <input type="checkbox"/> Roman Catholic | <input type="checkbox"/> Church of Ireland (incl. Protestant) | <input type="checkbox"/> Presbyterian | <input type="checkbox"/> Methodist, Wesleyan | <input type="checkbox"/> Jewish |
| <input type="checkbox"/> Muslim (Islamic) | <input type="checkbox"/> Orthodox (Greek, Coptic, Russian) | <input type="checkbox"/> Apostolic or Pentecostal | <input type="checkbox"/> Hindu | <input type="checkbox"/> Buddhist |
| <input type="checkbox"/> Jehovahs Witness | <input type="checkbox"/> Lutheran | <input type="checkbox"/> Atheist | <input type="checkbox"/> Baptist | <input type="checkbox"/> Agnostic |
| <input type="checkbox"/> Other Religions | <input type="checkbox"/> No Religion | <input type="checkbox"/> 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: _____ **Parent/Guardian**

Date: _____

Please complete this form and return to your primary school. For further information on POD please go to the Department of Education and Skills' website www.education.ie



DATA PROTECTION Parental Consents

I/we give permission to contact my child's previous school/preschool to obtain copies of teachers' records, class notes, academic records, psychological reports and other records necessary for my child's educational welfare and for aiding his/her transition. I hereby give the school my consent and do instruct and direct that my child's previous school/preschool to release these documents to Holy Spirit G.N.S.

Signed: _____ (Parent / Guardian)

Date: _____

I/we give consent to Holy Spirit G.N.S. to transfer copies of teachers' records, class notes, academic records, psychological reports and other records necessary for my child's educational welfare and for aiding his/her transition to post primary school.

Signed: _____ (Parent / Guardian)

Date: _____

Please confirm if you are happy for us to contact you by SMS/text message and/or email and to call you on the telephone numbers provided.

Signed: _____ (Parent / Guardian)

Date: _____

While the information provided will generally be treated as private to Holy Spirit G.N.S., and will be collected and used in compliance with the Data Protection Acts 1988 and 2003, from time to time it may be necessary for us to transfer your personal data to other bodies (including the Department of Education & Skills, the Department of Social Protection, An Garda Síochána, the Health Service Executive, Tusla (CFA) social workers or medical practitioners, the National Educational Welfare Board, the National Council for Special Education, any Special Education Needs Organiser, the National Educational Psychological Service, or (where the student is transferring) to another school). We rely on parents/guardians and students to provide us with accurate and complete information and to update us in relation to any change in the information provided. Should you wish to update or access your/your child's personal data you should write to the school principal requesting an Access Request Form.

A copy of the full Data Protection Policy is available on the school website.

Photographs and Digital Images of Students

The school maintains a database of photographs and digital images (including video) of school events held over years. It has become customary to take photographs of students engaged in activities and events in the interest of creating a pictorial as well as historical record of life at the school. Photographs/digital images may be published on our school website or in brochures, yearbooks, newsletters, local and national newspapers and similar school-related productions. In the case of website photographs/digital images, student names will not appear on the website as a caption to the picture. If you or your child wish to have his/her photograph/digital image removed from the school website, brochure, yearbooks, newsletters etc. at any time, you should write to the school principal.

Parent/Guardian (Contract and Consent)

In registering my above named child as a student in Holy Spirit G.N.S. I understand that this implies a full acceptance of the rules of the school as laid down from time to time by the board of management.

By signing below, I am giving full, explicit, and informed consent for Holy Spirit G.N.S. to confirm, retain, use and disclose the information I have provided in accordance with Holy Spirit G.N.S. Data Protection Policy.

Signed: _____ (Parent / Guardian)

Date: _____