## APPLICATION FOR ADMISSION to



Scoil Mhuire Gan Smál, New Inn, Cashel, Co. Tipperary. E25 VH05



(052) 7462122, <u>newinn.ias@eircom.net</u> www.newinngirlsschool.ie

## Student's Details:

First Name:	Surname:		
Form of Name to be used in school (if d	ifferent from above):		
Address:	Eircode:		
Date of Birth:	P.P.S. Number:	Gender: M/F	
If non-catholic do you wish your child to	o participate in Catholic religio	ous education in school? Y/N	
Nationality:	Home Phone Number:		
To which ethnic or cultural background	group does your child belong	to? (please tick one):	
White Irish □ Irish Traveller □ Ro	ma 🛘 Any other white backs	ground 🗆 Black African 🗆	
Any other black background ☐ Ch	inese 🗌 Any other Asian b	ackground $\square$	
Other (including mixed background)	]		
Parents/Guardians Contact Details			
Name: 1	2		
Address:			
Occupation:			
Mobile No.:			
Email Address:			
Mobile Number to be used on the school's "textaparent" service:			
Mother's maiden name:			

Name and number of persons to contact if parents are un	navailable:
Name: 1	2
Number:	
Relationship to child:	
Name of family members already in this school:	
Name of previous school (Creche/Playschool etc.)	
• Does your child wish to avail of school transport? Y	Yes No
In the case of an emergency do you give permission emergency services? Yes No	for your child to be seen by a doctor or a member of the
Doctor's Name:  D	Ooctor's Phone Number:
In the event of being unable to contact you, do you a case of an emergency? Yes No	authorise the teachers to take your child to hospital, in the
Language spoken at home:	
Any medical condition/allergies/illnesses we should	be aware of?
Any educational/psychological/motor issues/assessm	ments we should be aware of?
	/photo to be used on the school's website? Yes No ht appear on the school's website. Generally, photographs
• Do you support the school's Code of Behaviour? (s	see school booklet/website) Yes No
Do you give permission for your child to go on scho swimming, matches etc.? Yes No	ool outings while she/he is a pupil here. E.g. School tour,
• Do you give permission for these details to be share School Transport in accordance with current Data P	d with the Department of Education & Skills, H.S.E. & rotection regulations? Yes No
Do you give permission for your child to have supervised	d access to filtered internet sites in school? Yes No
Any other relevant information.	
Please sign: Father:	Mother: