

**St. Mary's Secondary School**  
Irishtown, New Ross, Co. Wexford

**STUDENT ENROLMENT FORM**

Academic Year for Enrolment 2018/2019

Year Group

1<sup>st</sup> year

**Student Personal Information**

Forename: \_\_\_\_\_ Surname: \_\_\_\_\_ Called : \_\_\_\_\_  
(As on Birth Certificate)

DOB: \_\_\_\_\_ Student PPS: \_\_\_\_\_ Nationality: \_\_\_\_\_

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

Correspondence Title & Address \_\_\_\_\_

Email Address to receive information from school \_\_\_\_\_ (please print )

Mobile No for Web Texting : \_\_\_\_\_ (parent)

Correspondence – Address 2 (Additional reports /letters to a second person /address if needed)

<b>Current Primary School Name</b>	
<b>School Roll Number</b> - which can be obtained from current national school ( must be supplied)	
Name of sister/s - Current student of St. Mary's and year	
Name of sister/s - Former student and year of leaving St. Mary's	
Name of mother if former student and year of leaving St. Mary's	

**Office Use Only**

Birth Certificate  Proof of PPS  Ref No \_\_\_\_\_ PPOD

Date Received \_\_\_\_\_ Receipt No \_\_\_\_\_ Signed

Student's Religion ?		
Number of Children in the Family ?	Girls	Boys
Student position in the Family ?		
Has the Student Special Education Needs ?	Yes	No
Is the Student exempt from the study of Irish ?	Yes	No
Is the Student in receipt of Learning Support ?	Yes	No
Is the Student in receipt of Resource Hours ?	Yes	No

**Special Education Needs:**

If a student has Special Education Needs that will require considerable provision by the school, the parents are required to enclose a Psychological Assessment that includes a full description of support she will need to participate in the school curriculum.

**Student Health**

General State of Health: \_\_\_\_\_

Does the student have a medical card? Yes  No

Family Doctor: \_\_\_\_\_ Tel. No. \_\_\_\_\_

Please tick box if any consideration is required in school for any of the following:

Eyesight       Mobility       Hearing       Prescribed Medication

**Further information:** \_\_\_\_\_

**Parent /Guardian Personal Information**

**Mother**

Surname: \_\_\_\_\_ First Name(s) \_\_\_\_\_

Living  Deceased  Separated  Divorced

Personal Mobile: \_\_\_\_\_ if different from mobile for web texting

Home No: \_\_\_\_\_ Work No: \_\_\_\_\_

**Father**

Surname: \_\_\_\_\_ First Name(s) \_\_\_\_\_

Living  Deceased  Separated  Divorced

Personal Mobile: \_\_\_\_\_

Home No: \_\_\_\_\_ Work No: \_\_\_\_\_

## Additional Data Required by the DES

For the collection and return of student data by the school to the Department of Education and Skills.

Q1. What is the student's Nationality? \_\_\_\_\_

Q2. Is English or Irish the MOTHER TONGUE of the student ? YES  NO

IN RESPECT OF THE NEXT QUESTION YOU MAY OPT **NOT** TO PROVIDE AN ANSWER.

Q3. To which ethnic or cultural background does the above named student belong?  
Please circle only one category (these categories used are based on the Census)

1. White Irish
2. Irish Traveller
3. Roma
4. Any other white background
5. Black or Black Irish – African
6. Black or Black Irish – any other Black background
7. Asian or Asian Irish – Chinese
8. Asian or Asian Irish – any other Asian background
9. Other including mixed background
10. No consent

### **Data Protection**

The school recognises that the data collected in the enrolment process contains sensitive personal information which must be held in confidence subject to the requirements of the Freedom of Information Act (FOI) 1997 and the Data Protection Acts 1988 to 2003. This information is being notified to the Department of Education and Skills (DES) as part of the "Annual Post-Primary School October Return/Examination Entries" process. In completing and signing this form the Student/Parent/Guardian gives explicit consent for the collection of this data and to the sharing of this information with the DES for purposes as outlined in Circular 47/2010 which may be accessed at [www.education.ie](http://www.education.ie)

### **Photo Permission**

From time to time we use student images on printed material including, but not limited to: School Newsletters, School Brochure and School Journal. The school newsletter contains articles and occasionally pictures about school activities. This newsletter is distributed to members of the school community. Captions or text may identify students and staff members. The general school information brochure includes pictures of students, but the students are not identified by name. This publication is distributed to those who have expressed an interest in enrolling their children in our school. The school journal includes pictures of students in school activities. This is only distributed to students and staff members.

Additionally during school activities your child's photo may be taken and may be included on the St. Mary's School website or Twitter. At no time will any child's image be identified on the website or social media. St. Mary's Secondary School assumes permission to use your daughter's image within best child protection and data protection guidelines unless we receive a written request to exclude your daughter .

## Student's Enrolment Declaration

### Mission Statement

St. Mary's is a community which is proud of its Catholic tradition and is committed to developing each person's full potential in a positive, supportive and Christian environment. We invite everyone to participate and we urge everyone to contribute

I promise as a student of St. Mary's Secondary School

- To keep the Rules of the School
- To do my best in my studies at all times

**Signed:** \_\_\_\_\_ **Student**    **Date:** \_\_\_\_\_

### Parents'/Guardians' Enrolment Declaration both signatures (where applicable) needed

I/We agree to co-operate with the School Authorities in the implementation of this code & all other school Policies / Regulations / Routines

I/We confirm that we have read the School's Admission Policy and the School's Mission Statement

The following signatures endorse the accuracy of the completed details of this Enrolment Form

Mother / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Father / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Check List: have you enclosed the following?

Copy of Full Birth Certificate

Proof of student's PPS Number

School roll number of current school

Student and Parent /Guardian Signatures