Kiltale NS

Scoil Náisiúnta Mhuire Naofa

Kiltale,
Dunsany,
Co. Meath,
C15 XF86.

Charity No. 20131357
Roll No: 17742P

(046) 9025619
office@kiltalens.ie
principal@kiltalens.ie
www.kiltalens.ie

Application for Admission of New Pupils for School Year 2027/2028

Please note that this form is for application purposes only. The information provided will be used to allocate Junior Infant and or available places in accordance with the School's Admission Policy/Annual Admission Notice https://kiltalens.ie/policies/ . Please complete all sections of the form.

Pupil's Details		
Pupil's Surname Name:		**Pupil's First Name:**
Date of Birth:		**Gender:**
P.P.S. Number:		**Mother's Maiden Name:**
Address:		**Country of Birth:**
		Nationality:
		Language spoken in the home:
Eircode:		**Pupil's Religion:**
Parent/Guardian Details		**Parent/Guardian Details**
First Name:		**First Name:**
Surname:		**Surname:**
Relationship to Child:		**Relationship to Child:**
Address: (if different from pupil's)		**Address:** (if different from pupil's)
Home Phone No.:		**Home Phone No.:**
Work Phone No.:		**Work Phone No.:**
Mobile Phone No.:		**Mobile Phone No.:**
Email Address:		**Email Address:**
Occupation:		**Occupation:**

Kiltale,
Dunsany,
Co. Meath,
C15 XF86.

Charity No. 20131357
Roll No: 17742P

(046) 9025619
office@kiltalens.ie
principal@kiltalens.ie
www.kiltalens.ie

This Application *MUST* be accompanied by your child's *ORIGINAL* birth certificate.
The school will make a copy of the document submitted and will return the original document.

Names of brothers / sisters in this school and the classes they are in:		
Please tick	**Yes**	**No**
Are there any orders or other arrangements in place governing access to or custody of your child?		
The school may share Personal Pupil Data with other organisations such as HSE, Tusla, An Garda Síochána, etc., where there is a legal basis for doing so under GDPR.		

Current School / Pre-school Details

Name of Current School/Pre-school:	**Current Class:**
Address:	
Principal's Name:	**Phone No.:**
Number of Years in Current School/Pre-school:	

Additional local contact names, to be contacted in **EMERGENCIES** (Not the same as above)

Name:		Phone No.:
Relationship to Child:		
Name:		Phone No.:
Relationship to Child:		
Name:		Phone No.:
Relationship to Child:		

Approved adults who may collect your child from school (Other than parents)

Name:		Phone No.:
Name:		Phone No.:

Kiltale,
Dunsany,
Co. Meath,
C15 XF86.

Charity No. 20131357
Roll No: 17742P

(046) 9025619
office@kiltalens.ie
principal@kiltalens.ie
www.kiltalens.ie

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 sensitive personal data categories under Data Protection legislation. These questions are optional. While these questions are optional, the information would be very useful to the Department for statistical and research purposes. Aggregated information on Ethnic/Cultural background will be used to track the progress of these groups, and to compare their progress with other groups, thereby identifying gaps in the system and assisting in the development and implementation of appropriate policies and interventions. Enhanced capitation in respect of pupils who are members of the Traveller Community will be paid to schools on the basis of the answers to this question. Aggregated information on religion will be used for statistical purposes only. Parents/guardians are asked, if they wish to do so, to identify their children's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills.

To which ethnic or cultural background group does your child belong (please tick one)?
(Categories are taken from the Census of Population)

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)	☐	No consent	☐

What is your child's religion?

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	☐
Christian Religion (not further defined)	☐	Protestant	☐	Evangelical	☐
Other Religions	☐	No Religion	☐	No Consent	☐

I consent for this sensitive personal data in the two questions above 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:** _____

For further information on POD please go to the Department of Education and Skills' website www.education.ie

Kiltale,
Dunsany,
Co. Meath,
C15 XF86.

Charity No. 20131357
Roll No: 17742P

(046) 9025619
office@kiltalens.ie
principal@kiltalens.ie
www.kiltalens.ie

The following Developmental Checklist is taken from the B.I.A.P. (Belfield Infant Assessment Profile)
Please take the time to read and complete in order to help build your child's profile for learning.

Developmental Checklist

Please tick (√) as appropriate.	NORMAL	ABNORMAL	COMMENT
Birth History	☐	☐	_____
			_____

Developmental Milestones	YES	NO	COMMENT
Walking (by 18 months)	☐	☐	_____
Talking (by 2 years)	☐	☐	_____
Toilet Trained (by 3 years	☐	☐	_____

Laterality	RIGHT-HANDED	LEFT-HANDED	MIXED
	☐	☐	☐

Childhood Illnesses

Comment - type, duration, hospitalisation, etc.

_____

Family Doctor:_____ **Phone No.**_____

Address:_____

Medical Conditions: (Please state if your child has a medical condition, e.g., Asthma, epilepsy, allergies, etc)

_____

_____

A Healthcare Plan must be completed for all medical conditions before the school year begins.

Medical History	YES	NO
Does your child have any allergies?	☐	☐
Do they take any medication?	☐	☐

Give details and specify if medication is to be taken in school.

_____

_____

In the case of an emergency, the school has permission to bring my child for emergency medical treatment.

****Signed:**_____

Other Adverse Circumstances

Give details and specify any condition not listed above which might be considered to affect the child's ability to benefit from school. _____

_____

Kiltale,
Dunsany,
Co. Meath,
C15 XF86.

Charity No. 20131357
Roll No: 17742P

(046) 9025619
office@kiltalens.ie
principal@kiltalens.ie
www.kiltalens.ie

NB: Please make the school aware as early as possible of any family situation, such as bereavement, family illness or separation that could impact on your child, so that we can be as supportive as possible.

Referral to Other Agencies

Has the child been referred to any other outside agency (speech therapist, social worker, psychologist, specialist)?

YES ☐ NO ☐ COMMENT _____

_____

	SATISFACTORY	UNSATISFACTORY	COMMENT
1. Vision	☐	☐	_____
2. Hearing	☐	☐	_____
3. Physical Co-ordination	☐	☐	_____
4. Speech (articulation)	☐	☐	_____
5. Language (expression)	☐	☐	_____
(comprehension)	☐	☐	_____
6. Sociability	☐	☐	_____
7. Concentration	☐	☐	_____
8. General alertness	☐	☐	_____

Any Other Comments:

_____

_____

_____

_____

I agree that I have read Kiltale NS's Code of Behaviour Policy, (available on our website https://kiltalens.ie/policies/) and my child and I will abide by it.
Please tick one of the following:-

☐ Yes
☐ No

Kiltale,
Dunsany,
Co. Meath,
C15 XF86.

Charity No. 20131357
Roll No: 17742P

(046) 9025619
office@kiltalens.ie
principal@kiltalens.ie
www.kiltalens.ie

Declaration:

I/We being the Parent(s)/Guardian(s) of the applicant do hereby confirm that the above information is true and accurate and I/we consent to its use as described.	
Parent/Guardian's Signature:	Parent/Guardian's Signature:
Date:	Date:

Please ensure all areas have been completed and **SIGNED**.

Data Privacy Statement

The information provided on this form will be used by Kiltale NS to apply the selection criteria for enrolment in Junior Infants or any other class, and to allocate school places in accordance with the School's Admission Policy and the School's Annual Admission Notice.
Where a pupil is admitted to the school, the information will be retained on the pupil's file.
On acceptance of an offer of admission, this information will be entered in the School Administration System Aladdin and will be uploaded to the Primary Online Database. The Primary Online Database (POD) is a nationwide individualised database of primary school pupils, hosted by the Department of Education and Skills.

In the event of oversubscription, a waiting list of students whose applications for admission to Kiltale NS were unsuccessful due to the school being oversubscribed will be compiled, and will remain valid for the school year in which admission is being sought (See Section 12 of our Admission Policy).

Where a child's name is placed on a waiting list, and the child is not admitted to the school, the information provided on this form will be retained for the duration of the school year and will be securely destroyed thereafter.

Section 66(6) of the Education (Admission to Schools) Act 2018 allows for the sharing of certain information between schools in order to facilitate the efficient admission of students. The information which may be provided to a patron or another Board of Management for this purpose may include all or any of the following:

(i) the date on which an application for admission was received by the school;
(ii) the date on which an offer of admission was made by the school;
(iii) the date on which an offer of admission was accepted by an applicant;
(iv) a student's personal details including his or her name, address, date of birth and personal public service number (within the meaning of section 262 of the Social Welfare Consolidation Act 2005).

Office Use only:

*Date Application Received	D	D	M	M	Y	Y