

RUSHEEN NATIONAL SCHOOL

APPLICATION FOR ADMISSION OF NEW PUPILS: YEAR 2014/2015

1. NAME OF PUPIL: _____
2. DATE OF BIRTH: _____
3. ADDRESS: _____
4. FATHER'S NAME: _____ MOTHER'S NAME: _____
5. PARENTS' OCCUPATION(S) _____
6. HOME PHONE NO: _____ WORK PHONE NO: _____ (Father) _____ (Mother)
MOBILE NO: _____ (Father) _____ (Mother)
7. PARTICULAR HEALTH PROBLEMS/SPECIAL DIFFICULTIES (Sight, Hearing, Speech, Asthma, Epilepsy, etc.) _____

8. FAMILY DOCTOR & PHONE NUMBER: _____
9. RELIGION: _____
10. IN THE EVENT OF AN EMERGENCY, ALTERNATIVE NAME, ADDRESS & TELEPHONE NUMBER TO BE CONTACTED: _____

11. PREVIOUS SCHOOL EXPERIENCE (if any) _____
12. IRISH VERSION OF CHILD'S NAME (Otherwise school will translate): _____
13. DO YOU GIVE PERMISSION TO TAKE THE CHILD STRAIGHT TO HOSPITAL IN THE CASE OF SERIOUS ILLNESS OR ACCIDENT? _____
14. DOES ANY LEGAL ORDER UNDER FAMILY LAW EXIST THAT THE SCHOOL SHOULD KNOW ABOUT? _____
IF YES, PLEASE SPECIFY _____

15. PLEASE PROVIDE ANY OTHER RELEVANT INFORMATION IN THE SPACE BELOW: _____

16. PLEASE ATTACH A BAPTISMAL CERTIFICATE IF BAPTISED, OTHERWISE A BIRTH CERTIFICATE WILL SUFFICE.
17. DURING THE YEAR YOUR CHILD MAY BE GIVEN DIAGNOSTIC TESTS. DO YOU GIVE THE SCHOOL PERMISSION TO ADMINISTER THESE TESTS. _____

I HAVE READ THE CODE OF BEHAVIOUR OF RUSHEEN N.S. AND AGREE THAT MY CHILD ABIDES BY ITS CONTENT. I ALSO AGREE THAT MY CHILD ADHERE TO ALL SCHOOL PRACTICES AND PROCEDURES.

Enrolling your child in Rusheen N.S. implies acceptance of the principles and procedures as outlined in the code of behaviour

MOTHER /GUARDIAN

FATHER/GUARDIAN