



Scoil Eoin

Application for Admission To Special Class

Greendale Road,
Kilbarrack,
Dublin 5.
D05K5P2

Roll No: 19935 N
Charity No: 20117818

STUDENT DETAILS

Name:	
Address:	
Eircode: (required)	
Date of Birth:	
Gender:	
PPS Number: (required)	
Nationality:	
Religion:	
Last School/Pre-School Attended:	
Sibling/s in the School:	
Have you made an application to another school:	

Parent/Guardian Details	1	2
Name		
Mobile Phone Number		
Home Phone Number		

	Emergency Contact 1	Emergency Contact 2
Name		
Mobile Phone Number		
Home Phone Number		

Please ensure that contact numbers are available during school hours and keep advised of changes

REQUIREMENTS

- **Assessment Reports**
- **Birth Certificate required for all new entrants**
- **2 forms of Proof of Address i.e. utility bills**
- **The school should be made aware of any court order which affects the child's welfare and also the name of any person into whose custody the child should not be given**
- **(If your child has been baptised in the Catholic Church and it is your intention that s/he participates in sacramental preparation, please enclose an original Baptismal Certificate which will be copied and returned. Please note that provision of a Baptismal Certificate is not a condition of enrolment and is being requested for the direct purpose relating to the sacraments.)**

Parental Consent

Parental consent will remain in place throughout your child's time in this school unless written notice to the contrary is supplied to the school

I/We give permission to the school to contact the Emergency Services in the event that the school cannot contact me or any of the numbers supplied in an emergency situation	Please Initial
I/We consent to my/our child being assessed if necessary with a view to providing additional support if required	Please Initial
I/We give permission to the school to treat minor injuries with band aids, water and antiseptic wipes	Please Initial
I/We give permission to the school to use my/our child's schoolwork/photograph on the school website	Please Initial
I/We give permission to the school for my/our child to access the internet for educational purposes, in line with the Acceptable Use Policy	Please Initial

Medical / Other Relevant Information

Health Issues or Allergies	
Other Relevant Information	

- All information sought above will be treated in compliance with Data Protection Policy.
- PPS Numbers and Eircode must be provided to comply with DES requirements.
- Application for enrolment does not ensure a place in this school as places are awarded as per our Enrolment Policy.

Assessment Reports Included with Application

Tick	Professional Report	Date of Report
	Psychologist Report	
	Psychiatrist Report	
	Occupational Therapist Report	
	Speech & Language Report	
	Physiotherapist Report	
	Assessment of Need Report	
	Early Intervention Team Report	
	Other:	

NB

Please ensure that reports recommend placement in ASD Class in a mainstream primary school and not a pre-school / early childhood setting.