

T: 021-4357852
M: 086-0229419
Email: info@holycrosscork.ie
Website: www.holycrosscork.ie



Scoil na Croise Naofa,
Mahon,
Cork.
T12 R252

We Welcome, We Encourage, We Learn.

Enrolment Form

Pupil's Name (As per Birth Cert): _____

Address: _____ Eircode: _____

Date of Birth: _____ P.P.S.N: _____ Nationality: _____

Religion: _____ Proposed class _____ Year of Entry _____

Mother/Guardian's Name: _____ Father/Guardian's Name: _____

Mother's Telephone No: _____ Father's Telephone No: _____

Mobile Number to be used for information Texts from school to Parents: _____

Child lives: With Mother and Father () With Mother () With Father ()

Is the language spoken at home Irish or English? YES () NO () Other: _____

To which ethnic or cultural background does your child belong?

White Irish ()	Irish Traveller ()
Any other White Background ()	Roma ()
Black / Black Irish - African ()	Black / Black Irish - Any other Black Background ()
Asian / Asian Irish – Chinese ()	Asian / Asian Irish - Any other Asian Background ()
Other (including mixed background) ()	

Name(s) of other contacts if parents are unavailable (Emergency Contacts): **(ESSENTIAL)**

Name: _____ Name: _____

Contact No: _____ Contact No: _____

Relationship to child: _____ Relationship to child: _____

Preschool name: _____

Previous Primary School: _____

Reason for transfer : _____

Medical History.

Doctor's Name and Contact Number: _____

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Sight Issues? (Yes/No) Hearing Issues? (Yes/No) Speech Issues? (Yes/No) Asthmatic?
(Yes/No) Allergies? (Yes/No) On Medication? (Yes/No)

If you answer yes to any of the above please elaborate:

Have you any concerns about your child that the school should be aware of?

Has your child ever been referred to any agency providing Psychological/Psychiatric Services (e.g. CAMHS/HSE), Speech Therapist, Eye/Ear Specialist, Occupational Therapist etc. Yes () No ()

If yes, please state the name of the service and the reason for referral. Please supply relevant reports if available.

Is there any other significant information which, you feel as parents, should be included? E.g. problems at home about behavioural management, emotional traumas such as bereavements etc.

- I have read and accept the terms of the Code of Behaviour.
- I understand that my child may appear in group photographs on the school website or other authorised publications including the school's social media platform.
- I am aware that information about my child will be uploaded on to the Department of Education's database called the Primary Online Database including religion and ethnicity and I consent to this.
- The information given on this form will be processed by the Data Controller (Board of Management) in compliance with the General Data Protection Regulation (GDPR) for schools.

Signature of Parent/Guardian _____

Date: _____

Birth Certificate required on admission.
Baptismal Certificates will be required, only for pupils making First Holy Communion.