

Students with Special Education Needs

1. Has the student ever had a Psychological Assessment? Yes No
2. Date of Assessment: ____/____/____
3. Name & Address of Psychologist _____
4. Did the student have a Special Needs Assistant (SNA) **in the previous school**? Yes No
5. Did the student receive **resource/ learning support**? Yes No
6. If yes, how many hours per week? _____

Exceptionally Able Students (IQ greater than 130)

1. At what age was your child identified as being exceptionally able? _____
2. What standardised test was used to identify this talent? (ie psychological assessment, SAT tests, IQ test)

3. Is he/she attending accelerated learning courses outside of school? Yes/ No
4. If Yes please give details.

5. Is the student a member of the 'Centre for Talented Youth in Ireland (CTYI)'? Yes No
6. Is the student a member of the 'Irish Association for Gifted Children (IAGC)'? Yes No

Health:

Please outline any health related issues and/or medication of which the school needs to be aware:

Note: The school must be notified immediately if (a) there is a change of address (b) there is a change of telephone numbers, (c) any relevant health issues not listed above arise.

Declaration

I declare all the above information to be true and give my consent for any of the named professional personnel/ organisations on this form to be contacted.

Signed: _____ Date: _____

For Official Use Only

TS : Yes No

GAELOHOLAISTE AN CHLAIR



Passport
Photo

NAME: _____

FIRST YEAR SCHOOL ENROLMENT FORM

INCOMPLETE APPLICATIONS WILL BE RETURNED FOR COMPLETION

Please complete in CAPITAL LETTERS, using blue/black pen.

PLEASE ENSURE YOU HAVE ENCLOSED THE FOLLOWING:

- Complete Application Form
- Original Birth Certificate *(copy will be taken and original will be returned)*
- 1** Passport Photo *(name on back)*
- Academic Report from Primary School(s) *(upon acceptance)*
- NB: Official Irish Exemption Certificate *(if applicable)*
- Copy of Psychological Assessments *(if applicable, upon acceptance)*
- Photocopy of Medical Card *(if applicable)*

Student Details:

Surname: _____ Forename: _____
 Address: _____

Date of Birth: ____/____/____ **Male** **Female**

PPS Number: _____

New Entrant to Ireland: **Y** **N**

Date of Entry to Ireland (if applicable): ____/____/____

Medical Card Number (if applicable): _____

If you cannot locate number, please contact your local Social Welfare Office (Ennis: 065-6829899)

Family Details:

Father **Guardian** (please tick)

Surname	Forename	Home Telephone	Work Telephone	Mobile Telephone

Father/Guardian Postal Address	Father/Guardian Occupation

Email address _____

Mother **Guardian** (please tick)

Surname	Forename	Home Telephone	Work Telephone	Mobile Telephone

Mother's surname before marriage _____

Mother/Guardian Address	Mother/Guardian Occupation

Email address _____

Siblings

Number of children in the family: _____

List each child's age and school they are currently attending (where applicable)

Age	School	Age	School

Forwarding Name(s) and Address(es) for Official School Correspondance:

Name: _____

Address: _____

Telephone Number: _____

In the case where parents have seperate addresses, please indicate here who should receive correspondance: Both ____ *Father only* ____ *Mother only* ____

Student's Previous Schooling:

List *any* previous schools attended, address of school and years in attendance (In Ireland or abroad)

School: _____ Years: ____ to ____

School: _____ Years: ____ to ____

School: _____ Years: ____ to ____

Irish or Foreign Language Exemption Certificate:

1. Does your son/daughter have an exemption from Irish or foreign languages from the Department of Education and Skills?

Yes **No**

2. If Yes, please enclose a copy of the Irish Exemption Certificate.

Note: Students who do not have an official exemption from Irish from the Department of Education & Skills must study Irish.

If Irish or English is NOT the Student's First Language

State student's first, second & third languages;

(1) _____ (2) _____

(3) _____

How many years has he/she been studying Irish? ____ English? ____

Student's Level of Irish:

Beginner **Beginner- Intermediate** **Intermediate** **Intermediate- Advanced** **Advanced**

Parents'/ Guardians' Level of Irish:

Beginner **Beginner- Intermediate** **Intermediate** **Intermediate- Advanced** **Advanced**