



Roscommon Town,
Co. Roscommon.
Tel: 090 66 26872
Fax: 090 66 26872
Email: info@comanswoodprimary.ie
www.comanswoodprimary.ie

APPLICATION FOR ENROLMENT 2019- 2020

Any information you give on this form will be treated with the strictest confidence and only used for the benefit of your child. **Filling in this application form does not guarantee a place in our school. Your application will not be accepted unless you enclose your child's Birth Certificate. CLOSING DATE: FEBRUARY 10th in year of Enrolment.**

USE BLOCK CAPITALS PLEASE

1. Child's NAME and SURNAME as on birth certificate : _____ Gender: _____

2. Date of birth: _____ 3. Mother's maiden name: _____

4. Name and class of siblings already in the school: _____

5 (a) Number of children in the family: _____ 5(b) Placing of child (1st, 2nd etc.): _____

6. PARENTS: The following information on both parents is needed for registration purposes.

Name: _____ Name: _____

Occupation: _____ Occupation: _____

Nationality: _____ Nationality: _____

Language/s spoken at home: _____ Date of arrival in Ireland: _____

If you do not understand the questions on this form, please ask for help.

7. CHILD'S RESIDENTIAL ADDRESS

(a) With whom does the child normally reside: Both parents: _____ Mother: _____ Father: _____

Address: _____

Eircode: _____ Email Address: _____

(b) Is there any court/barring order in place against any person? Yes _____ No _____

If yes, who? _____

8. Mobile No. for "text-a-parent" : _____ 9. Other Parent Mobile : _____

PLEASE LET THE OFFICE KNOW IF THESE NUMBERS CHANGE.

10. 1st contact person if parent not available: Name: _____

Phone No. _____

2nd contact person if parent not available: Name: _____

Phone No. _____

PLEASE
ATTACH A
PASSPORT
PHOTO
Digital photo
accepted

11. Religion: _____ 12. Place of Baptism (if applicable): _____

If you wish your child to take the Sacraments, please ATTACH COPY OF BAPTISMAL CERT if child was baptised outside the parish as he will not be on record here. THIS



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IS NOT A CONDITION OF ENROLMENT.

13. Child's P.P.S. No.: _____

The P.P.S. number is required by the Department of Education and Science for registration purposes.

14. Name and address of pre-school or previous school attended: _____

If applying to transfer from another school to St. Comán's Wood P.S. please give your reason for doing so:

15. Phone no. of previous school: _____

I give permission to the principal to discuss the needs of my son/daughter, with the manager of the pre-school/school listed above.

Yes

No

16. Name and phone no. of Family Doctor: _____

MEDICAL CONFIDENTIAL / USED ONLY FOR HEALTH & SAFETY REASONS

- Has your child any medical condition? Yes No
- Has your child ever been referred to a specialist? Yes No
- If 'Yes' to either of these questions, please give details:

- Is your child on medication? Yes No

- Does your child appear to have difficulties with any of the following:

Hearing	Yes	No
Sight	Yes	No
Speech	Yes	No
Allergy	Yes	No

Patron: .Bishop Kevin Doran

Principal: Dr. Úna Feeley

St. Comán's Wood P.S.
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NOTE: The principal or A/Principal will call the Family Doctor OR any Doctor/Emergency Services in the unlikely event of not being able to contact parents for instructions / while awaiting parents arrival.

17. ASSESSMENT HISTORY

Has your child ever had any of the following types of assessment?

Psychological	Yes	No
Psychiatric	Yes	No
Occupational Therapy	Yes	No
Speech and Language	Yes	No
OTHER (e.g. behavioural)	Yes	No
Exempt from Irish	Yes	No

18. If 'Yes' to any of the foregoing, please a) give details hereunder and b) **supply copies of reports** which will be held/treated confidentially:

19. Copies of reports supplied?

Yes No

20. Do you give permission for your child to go on school trips under teacher supervision during the school day e.g trips to the local town park, local historical buildings etc.

Yes No

21. Sometimes journalists visit our school to take pictures of the children e.g awards/prizes, sporting events, first day at school etc. Do you give permission for your child to be photographed for school projects, local newspapers, and school related activities?

Yes No



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The Board of Management cannot be held responsible for pictures/video taken by parents at the Easter Parade, Band outings, Celebrations, School Concert etc.

22. Do you give permission for your child's photo to be used on the school website? Yes No

23. Sometimes the school is requested to pass on names of children and their addresses to the Health Board for immunisation purposes, to schools when children are transferring to another school, to sporting bodies when children are taking part in games outside the school. Information Data is also stored on the Primary Online Database (POD) and transferred to the Department of Education and Skills. Do you allow the school to pass on this information to these bodies?

Yes No

24. The school teaches Relationships and Sexuality Education (RSE) using the guidelines provided by the Department of Education and Science. If you would like to view the content of the programme used in the school for teaching RSE you are welcome to do so.

If you have any concerns with regard to RSE please tick this box so that an appointment will be made with the principal to discuss your concerns.

25. The school uses Data Biz Solutions (an Irish software company) for managing school data securely. Databiz uses Stripe (an international processing firm) as its card payment processor. Stripe has been audited by a PCI-certified auditor, and is certified to PCI Service Provider Level 1. This is the most stringent level of certification available. DataBiz Solutions will not use or share your contact information for any reason whatsoever other than those approved by St Coman's Wood Primary School. No card details are copied, recorded, or stored at any point by DataBiz Solutions or St Coman's Wood Primary School.

In signing this application form I am agreeing to support the Board of Management and staff in their implementation of school policies. I am aware that all school policies including policies on behaviour, anti-bullying/anti-cyber bullying, attendance, child-protection, special needs etc. are available on request. I agree to support the staff in their efforts to provide a positive learning experience for all children in the school.

1st Parent/Guardian's signature: _____

2nd Parent/Guardian's signature: _____

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IF ANY OF THE DETAILS IN THIS FORM CHANGE - FOR EXAMPLE, IF YOU MOVE HOUSE, CHANGE YOUR PHONE NUMBER ETC. WOULD YOU PLEASE INFORM THE SCHOOL AT THE EARLIEST OPPORTUNITY.

PLEASE DON'T FORGET TO ATTACH A COPY OF ALL ASSESSMENTS RELATING TO YOUR CHILD'S DEVELOPMENT AND/OR NEEDS

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