

St. Aloysius Secondary School



FIRST YEAR ENROLMENT FORM 20__

Please complete in BLOCK CAPITALS

Surname First Name Student PPS No.
 Address
 Home Telephone Mobile Phone E-mail Address:
 Date of Birth..... Religion..... Nationality: County of Birth (If Irish)
 Will your daughter have completed a full course of Primary Education by 31st July, 20__? Yes No
 Name of primary school last attended:.....Tel. No.....

FIRST NAME(S) OF DAUGHTER(S) PRESENTLY ATTENDING ST ALOYSIUS SCHOOL

	First Name	Date of Birth	Year Group	Class
1.				
2.				
3.				

DETAILS OF PARENTS/ GUARDIANS

	Name	Mobile Phone No.	Work Telephone No.
Name of Father			
Name of Mother			
Mother's Maiden Name			

Information about family unit (e.g. If parent is deceased) which you consider should be known to the school authorities

MEDICAL HISTORY

Name of Family Doctor Doctor's Tel. No.
 Please provide any relevant information
 Does your family have a current Medical Card? Yes No

SPECIAL EDUCATIONAL NEEDS

Does your daughter have a Special Educational Need? Yes _____ No _____

Please specify: _____

I/we consent to the information given on the above form being held by the school and to it being shared with the Department of Education and Skills. I/We agree to appropriate testing to monitor her progress on a twice yearly Basis.

Signature: (1) _____ (2) _____

USE OF PHOTOGRAPHS

It is necessary for schools to seek parental permission to use photographs of school activities which feature students. Photos with names may appear in the press but will not be used on internet websites. Please tick and sign below:

I give my permission for use of photos: Yes _____ No _____

Signed : _____ Parent / Guardian

Signed: _____ Parent / Guardian

CODE OF BEHAVIOUR AND DISCIPLINE

I have read and agree to fully accept the code of Behaviour and Discipline of St. Aloysius Secondary School Cork.

Signature of Parent/Guardian: (1) _____ (2) _____ Date _____

Does your daughter hold an exemption in Irish Yes _____ No _____. If you answer yes a copy of the exemption granted through the Primary School must be provide following an offer and acceptance of a place in St. Aloysius.

I certify that the above information is correct

Signature Date

Parent / Guardian

Parent / Guardian

FOR OFFICE USE ONLY

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<i>Amount Received</i>		<i>Date / Receipt No.</i>	
<i>Cash / Cheque</i>		<i>Birth Certificate</i>	
<i>Passport Photos</i>		<i>Approved By</i>	