



**Seoladh/Address:** Scoil Mhuire, Church Rd., Moycullen, Co. Galway H91 HF10  
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**Suíomh Idirlín/Website:** [www.moycullencentralschool.ie](http://www.moycullencentralschool.ie)  
**Uimhir Rolla/Roll Number :** 19529C

## IARRATAS AR CHEAD ISTEACH APPLICATION FOR ADMISSION

|   |  |                                       |                    |                               |
|---|--|---------------------------------------|--------------------|-------------------------------|
| <b>1</b>  | <b>Sonraí an Pháiste<br/>CHILD'S DETAILS</b> |                                       |                    |                               |
| Líon an fhoirm seo le BLOCLITREACHA, le do thoil/PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS  |  |                                       |                    |                               |
| An rang a iarrtar cead isteach a fháil ann<br>CLASS FOR WHICH ADMISSION IS SOUGHT   |  |                                       |                    |                               |
| Céad Ainm an Pháiste<br>CHILD'S FIRST NAME  |  | Sloinne an Pháiste<br>CHILD'S SURNAME |                    |                               |
| Uimhir Phearsanta Seirbhíse Poiblí (Uimh. PSP) an pháiste<br>CHILD'S PERSONAL PUBLIC SERVICE NUMBER (PPSN)  |  |                                       |                    |                               |
| Gnéas an Pháiste<br>CHILD'S GENDER  | Fireann<br>MALE                              |                                       | Baineann<br>FEMALE |                               |
| Dáta Breithe<br>DATE OF BIRTH   | Lá/DAY                                       | Mí/MONTH                              | Bliain/YEAR        |                               |
| Tír Bhreithe an Pháiste<br>CHILD'S COUNTRY OF BIRTH   |  |                                       |                    |                               |
| Náisiúntacht an Pháiste<br>CHILD'S NATIONALITY  |  |                                       |                    |                               |
| Creideamh an Pháiste<br>CHILD'S RELIGION  |  |                                       |                    |                               |
| Cead Creideamh an Pháiste a inchur ar Bhunachar Sonraí Bunscoile<br>CONSENT TO INPUT CHILD'S RELIGION ON PRIMARY ONLINE DATABASE<br>(Féach nótaí/SEE NOTES) |  |                                       | Tá/YES             | Níl/NO                        |
|   |  |                                       |                    |                               |
| Cúlra Eitneach an Pháiste/CHILD'S ETHNIC BACKGROUND   |  |                                       |                    |                               |
| WHITE IRISH   |  | OTHER WHITE                           |                    | ASIAN/ ASIAN IRISH CHINESE    |
| IRISH TRAVELLER   |  | BLACK IRISH/AFRICAN                   |                    | OTHER ASIAN/ASIAN IRISH       |
| ROMA  |  | OTHER BLACK                           |                    | OTHER (inc. mixed background) |
| Cead Cúlra Eitneach an Pháiste a inchur ar Bhunachar Sonraí Bunscoile<br>CONSENT TO INPUT CHILD'S ETHNIC BACKGROUND ON PRIMARY ONLINE DATABASE              |  |                                       | Tá/YES             | Níl/NO                        |
|   |  |                                       |                    |                               |
| Seoladh Baile an Pháiste ar dháta Iarratais<br>CHILD'S HOME ADDRESS ON DATE OF APPLICATION<br><br>(Féach nótaí/SEE NOTES)                                   |  |                                       |                    |                               |
|   |  | Éircód<br>EIRCODE                     |                    |                               |

|  |   |  |
|--|---|--|
| <b>2</b>   | <b>Scoil/Réamhscoil is déanaí a d'fhreastail an páiste uirthi<br/>LAST SCHOOL/PRESCHOOL ATTENDED BY CHILD</b> |  |
| Ainm na Scoile/Réamhscoile<br>NAME OF SCHOOL/PRESCHOOL   |   |  |
| Seoladh na Scoile/Réamhscoile<br>ADDRESS OF SCHOOL/PRESCHOOL   |   |  |
|  | Éircód<br>EIRCODE   |  |
| Uimhir Ghutháin<br>PHONE NUMBER  |   |  |
| Seoladh Ríomphoist<br>EMAIL ADDRESS  |   |  |
| An fáth a bhfuil an páiste ag fágáil na scoile/réamhscoile<br>REASON CHILD IS LEAVING SCHOOL/PRESCHOOL | Ag Céimiú ó Réamhscoil<br>GRADUATING FROM PRESCHOOL   |  |
|  | Ag cur fúinn i Maigh Cuilinn<br>TAKING UP RESIDENCE IN MOYCULLEN  |  |
|  | Díbeartha ón Scoil/Réamhscoil<br>EXPELLED FROM SCHOOL/PRESCHOOL   |  |
|  | Fáth Eile (tabhair sonraí)<br>OTHER REASON (GIVE DETAILS)   |  |
|  |   |  |

|  |  |                                 |                     |
|--|--|---------------------------------|---------------------|
| <b>3</b>   | <b>Iarratais chuig Scoileanna Eile<br/>APPLICATIONS TO OTHER SCHOOLS</b> |                                 |                     |
| Sonraí maidir le hiarratais cláraithe curtha chuig scoileanna eile<br>DETAILS OF APPLICATIONS FOR ENROLMENT SUBMITTED TO OTHER SCHOOLS |  |                                 |                     |
| Ainm na Scoile<br>NAME OF SCHOOL   | Seoladh Ríomphoist<br>EMAIL ADDRESS                                      | Uimhir Ghutháin<br>PHONE NUMBER |                     |
|  |  |                                 |                     |
| Ar cuireadh áit sa scoil ar fáil duit?<br>HAS A PLACE IN THE SCHOOL BEEN OFFERED TO YOU?   |  | Cuireadh<br>YES                 | Níor cuireadh<br>NO |
|  |  |                                 |                     |
| Ar ghlac tú leis an áit?<br>HAVE YOU ACCEPTED THE PLACE?   |  | Ghlac<br>YES                    | Níor ghlac<br>NO    |
|  |  |                                 |                     |

| 4  | <b>Sonraí na dTuismitheora/gCaomhnóirí Dleathacha</b><br><b>DETAILS OF PARENTS/LEGAL GUARDIANS</b> |                  |  |
|--|--|------------------|--|
| <b>Ainm Tuismitheoir/Caomhnóir Dleathach 1</b><br><b>NAME OF PARENT/LEGAL GUARDIAN 1</b>   |  | Inscne<br>GENDER |  |
| Sloinne Caomhnóir Dleathach 1<br>SURNAME OF LEGAL GUARDIAN   |  |                  |  |
| Seoladh Ríomhphoist<br>EMAIL ADDRESS   |  |                  |  |
| Uimhir Ghutháin<br>PHONE NUMBER  |  |                  |  |
| Seoladh Baile (más difriúil ó Sheoladh Baile an<br>Phaiste)<br>HOME ADDRESS (IF DIFFERENT FROM<br>CHILD'S HOME ADDRESS)  |  |                  |  |
|  | Éircód<br>EIRCODE  |                  |  |
| Náisiúntacht<br>NATIONALITY  |  |                  |  |
| Slí Bheatha/Láthair Oibre<br>OCCUPATION/ WORKPLACE   |  |                  |  |
| Uimhir Ghutháin Oibre<br>WORK PHONE NUMBER   |  |                  |  |
| <b>Ainm Tuismitheoir/Caomhnóir Dleathach 2</b><br><b>NAME OF PARENT/LEGAL GUARDIAN 2</b>   |  | Inscne<br>GENDER |  |
| Sloinne Caomhnóir Dleathach 2<br>SURNAME OF LEGAL GUARDIAN 2   |  |                  |  |
| Seoladh Ríomhphoist<br>EMAIL ADDRESS   |  |                  |  |
| Uimhir Ghutháin<br>PHONE NUMBER  |  |                  |  |
| Seoladh Baile (más difriúil ó Sheoladh Baile an<br>Phaiste)<br>HOME ADDRESS (IF DIFFERENT FROM<br>CHILD'S HOME ADDRESS)  |  |                  |  |
|  | Éircód<br>EIRCODE  |                  |  |
| Náisiúntacht<br>NATIONALITY  |  |                  |  |
| Slí Bheatha/Láthair Oibre<br>OCCUPATION/ WORKPLACE   |  |                  |  |
| Uimhir Ghutháin Oibre<br>WORK PHONE NUMBER   |  |                  |  |
| Dlí Teaghlaigh: An bhfuil aon Orduithe Dlí i bhfeidhm? Tabhair sonraí le'd thoil in<br>Eolas Breise thíos.<br>FAMILY LAW: ARE ANY LEGAL ORDERS IN FORCE? PLEASE GIVE<br>DETAILS IN ADDITIONAL INFORMATION SECTION. | Tá/<br>YES   | Níl<br>NO        |  |

|   |  |                   |
|---|--|-------------------|
| <b>5</b>  | <b>Teagmhálacha i gcás éigeandála (muna bhfuil tuismitheoirí/caomhnóirí ar fáil)</b><br><b>EMERGENCY CONTACTS (IF PARENTS/GUARDIANS ARE UNAVAILABLE)</b> |                   |
| <b>Teagmháil Éigeandála 1</b><br><b>EMERGENCY CONTACT 1</b> | Ainm<br>NAME   |                   |
| Uimhir Ghutháin<br>PHONE NUMBER                             |  |                   |
| Seoladh Baile<br>HOME ADDRESS                               |  |                   |
|   |  | Éircód<br>EIRCODE |
| Gaoil leis an bPáiste<br>RELATIONSHIP TO CHILD              |  |                   |
| <b>Teagmháil Éigeandála 2</b><br><b>EMERGENCY CONTACT 2</b> | Ainm<br>NAME   |                   |
| Uimhir Ghutháin<br>PHONE NUMBER                             |  |                   |
| Seoladh Baile<br>HOME ADDRESS                               |  |                   |
|   |  | Éircód<br>EIRCODE |
| Gaoil leis an bPáiste<br>RELATIONSHIP TO CHILD              |  |                   |
| <b>6</b>  | <b>Daoine eile atá udaraithe chun an páiste a bhailiú ón scoil</b><br><b>OTHER PERSON AUTHORISED TO COLLECT THE CHILD FROM SCHOOL</b>                    |                   |
| Ainm<br>NAME  |  |                   |
| Uimhir Ghutháin<br>PHONE NUMBER                             |  |                   |
| Seoladh Baile<br>HOME ADDRESS                               |  |                   |
|   |  | Éircód<br>EIRCODE |
| Gaoil leis an bPáiste<br>RELATIONSHIP TO CHILD              |  |                   |

|  |   |               |                   |                              |
|--|---|---------------|-------------------|------------------------------|
| <b>7</b>   | <b>Ceangal leis an scoil<br/>CONNECTION TO THE SCHOOL</b> |               |                   |                              |
| Deirfiúracha/Dearthaireacha sa scoil faoi láthair<br>SIBLINGS CURRENTLY IN THE SCHOOL  |   |               |                   |                              |
| Ainm<br>NAME   |   | Rang<br>CLASS |                   |                              |
| Ainm<br>NAME   |   | Rang<br>CLASS |                   |                              |
| Ainm<br>NAME   |   | Rang<br>CLASS |                   |                              |
| Deirfiúrach/Dearthair sa scoil roimhe seo (ainmnigh duine amháin)<br>SIBLING FORMERLY IN THE SCHOOL (name one person)  |   |               |                   |                              |
| Ainm<br>NAME   |   | Rang<br>CLASS |                   |                              |
| Tréimhse Freastála<br>PERIOD OF ATTENDANCE   | Ó<br>FROM   |               | Go<br>TO          |                              |
| Tuismitheoir a d'fhreastail ar an scoil<br>PARENT WHO ATTENDED THE SCHOOL  |   |               |                   |                              |
| Ainm<br>NAME   |   | Rang<br>CLASS |                   |                              |
| Tréimhse Freastála<br>PERIOD OF ATTENDANCE   | Ó<br>FROM   |               | Go<br>TO          |                              |
| <b>8</b>   | <b>Sealbhú Teanga<br/>LANGUAGE ACQUISITION</b>            |               |                   |                              |
| An teanga is mó a labhraítear sa bhaile (féach nótaí)<br>MAIN LANGUAGE SPOKEN AT HOME (see notes)  |   |               |                   |                              |
| Líofacht Béarla an Pháiste (ábaltacht Béarla a labhairt)<br>CHILD'S FLUENCY IN ENGLISH (ABILITY TO SPEAK ENGLISH)  |   |               |                   |                              |
| Thar Cionn<br>EXCELLENT  | An-mhaith<br>VERY GOOD                                    | Maith<br>GOOD | Bunúsach<br>BASIC | Béarla ar bith<br>NO ENGLISH |
|  |   |               |                   |                              |
| Líofacht Gaeilge an Pháiste (ábaltacht Gaeilge a labhairt)<br>CHILD'S FLUENCY IN IRISH (ABILITY TO SPEAK IRISH)  |   |               |                   |                              |
| Thar Cionn<br>EXCELLENT  | An-mhaith<br>VERY GOOD                                    | Maith<br>GOOD | Bunúsach<br>BASIC | Béarla ar bith<br>NO IRISH   |
|  |   |               |                   |                              |
| I do thuairimse, an bhfuil aon riachtaí teanga ag an bpáiste. Más é do thuairim go bhfuil, tabhair sonraí thíos.<br>IN YOUR OPINION, DOES THE CHILD HAVE ANY LANGUAGE NEEDS? IF SO, PROVIDE DETAILS BELOW. |   |               | Tá<br>YES         | Níl<br>NO                    |
|  |   |               |                   |                              |

| 9  | Cúrsaí Sláinte<br>HEALTH |        |
|--|--------------------------|--------|
| Ríochtaí Sláinte/Bia/Ailléirgí<br>MEDICAL/HEALTH/DIETARY ISSUES  |                          |        |
| Leigheas Forordaithe le coinneáil ar scoil.<br>PRESCRIBED MEDICINE TO BE KEPT<br>AT SCHOOL   |                          |        |
| Ailléirge le leigheas<br>ALLERGY TO MEDICINE   |                          |        |
| Dochtúir an Pháiste<br>CHILD'S DOCTOR  |                          |        |
| Uimhir Ghutháin an Dhochtúra<br>DOCTOR'S PHONE NUMBER  |                          |        |
| Seoladh an Dhochtúra<br>ADDRESS OF DOCTOR'S SURGERY  |                          |        |
|  | Éircód<br>EIRCODE        |        |
| 10   | Measúnú<br>ASSESSMENT    |        |
| <p>Sonraí faoi Mheasúnaithe no Tuaraiscí déanta. Ba chóir go gcuirfí cóipeanna ar fáil don scoil agus áit sa scoil á ghlacadh.<br/>DETAILS OF ASSESSMENTS OR REPORTS DONE. COPIES SHOULD BE MADE AVAILABLE TO THE SCHOOL ON ACCEPTANCE OF A PLACE IN THE SCHOOL.</p> |                          |        |
| ASSESSMENT   | PROFESSIONAL/AGENCY      | DATE   |
| SPEECH THERAPY   |                          |        |
| OCCUPATIONAL THERAPY   |                          |        |
| PSYCHOLOGICAL  |                          |        |
| PAEDIATRIC/MEDICAL   |                          |        |
| OTHER<br>ASSESSMENTS/REPORTS<br>INCLUDING THOSE PENDING  |                          |        |
| An bhfuil do pháiste ag fáil tacaíochta ó CRS<br>IS/WAS YOUR CHILD IN RECEIPT OF SNA SUPPORT   | Tá/YES                   | Níl/NO |
|  |                          |        |

| 11   | <b>Glacadh agus Toiliú<br/>ACKNOWLEDGEMENT AND CONSENT</b> |     |    |
|--|--|-----|----|
| <b>TOILIÚ<br/>CONSENT</b>  |  | YES | NO |
| I consent to basic FIRST AID being administered to my child by school staff in the event of him/her having an accident, sustaining an injury or becoming unwell.   |  |     |    |
| I consent to my child being brought to a DOCTOR or a HOSPITAL in the event of an accident or medical emergency and to his/her receiving such treatment and being administered such medicine as medical personnel consider necessary.<br><i>Every effort will be made to contact you beforehand.</i>  |  |     |    |
| I consent to my child being changed by school staff in the event that he/she has become wet or soiled due to falling or to a toileting accident, in accordance with the school's INTIMATE CARE POLICY.   |  |     |    |
| I consent to my child's engagement with such digital and internet based teaching and learning platforms as have been selected by the school, e.g. SeeSaw, Google Classrooms.   |  |     |    |
| I consent to such educational/academic SCREENING and DIAGNOSTIC TESTS as are considered appropriate by the school being administered to my child to support his/her educational development.   |  |     |    |
| I consent to my child attending the Learning Support Teacher/Special Educational Needs Teacher if considered necessary by the school.  |  |     |    |
| I consent to my child's participation in supervised OFF-SITE SCHOOL ACTIVITIES such as school tours, class trips, local walks and outings, sporting events, visits to theatre and cinema, educational exhibitions, swimming lessons etc.   |  |     |    |
| I have read and accept the school's CODE OF BEHAVIOUR and I agree to make all reasonable efforts to ensure my child's compliance with same.  |  |     |    |
| I have read and accept the school's ANTI-BULLYING POLICY and agree to abide by same.   |  |     |    |
| I have read and accept the school's ACCEPTABLE USE POLICY and agree to abide by same.  |  |     |    |
| I have read and accept the school's COMPLAINTS AND GRIEVANCES POLICY and agree to abide by same.   |  |     |    |
| <b>Glacadh<br/>ACKNOWLEDGEMENT</b>   |  |     |    |
| I am aware that the information on this form will be stored on the school's data management system and the Department of Education's Primary Online Database.  |  |     |    |
| I acknowledge and accept that the school shares pupil names and contact details with the HSE for the purpose of scheduling vaccination, hearing and vision screening and dental examinations.  |  |     |    |
| I acknowledge that The Education (Welfare) Act 2000 (Section 28) and the (Prescribed Bodies) Regulations 2005 allows the school to share relevant information concerning a child transferring between our school and another recognised school without breaching data protection law.  |  |     |    |
| I acknowledge and accept that the school teaches the Stay Safe Programme and the Relationships and Sexuality Programme, both of which are part of the Department of Education & Skills Social and Personal Health Education Curriculum.  |  |     |    |
| I acknowledge that the school records and uses images of children, in accordance with the school's POLICY REGARDING PHOTOGRAPHS, that may be published on the school's website, in the school newsletter, in school-based publications, on online platforms in use by the school (Aladdin, Google Classroom, SeeSaw etc.) and in publications approved by the school management. |  |     |    |
| I will undertake to see that my child will attend school punctually and regularly.   |  |     |    |

**Dearbhú  
DECLARATION**

I have read and understood the above consents and acknowledgements.  
I have read and understood the school's information booklet which is available on the School Website (or in hard copy from the office) and I undertake that I and my child will comply with all school rules and policies.  
I wish to apply for the admission of my child to Scoil Mhuire.

|   |  |              |  |
|---|--|--------------|--|
| Síniú Tuismitheora/Caomhnóra<br>PARENT/GUARDIAN 1 SIGNATURE |  | Dáta<br>DATE |  |
| Síniú Tuismitheora/Caomhnóra<br>PARENT/GUARDIAN 2 SIGNATURE |  | Dáta<br>DATE |  |

**If you are the only PARENT/GUARDIAN providing a signature, please tick and sign the applicable section below.**

|   |                          |
|---|--------------------------|
| The child's other parent/guardian is fully aware of and in agreement with this enrolment application and is in agreement with the consents, terms and conditions as outlined. | <input type="checkbox"/> |
|---|--------------------------|

|   |  |              |  |
|---|--|--------------|--|
| Síniú Tuismitheora/Caomhnóra<br>PARENT/GUARDIAN SIGNATURE |  | Dáta<br>DATE |  |
|---|--|--------------|--|

|   |                          |
|---|--------------------------|
| I am the sole parent/guardian of my child and have sole custody of him/her. | <input type="checkbox"/> |
|---|--------------------------|

|   |  |              |  |
|---|--|--------------|--|
| Síniú Tuismitheora/Caomhnóra<br>PARENT/GUARDIAN SIGNATURE |  | Dáta<br>DATE |  |
|---|--|--------------|--|

**Eolas Breise a bheadh cabhrach don scoil  
ADDITIONAL INFORMATION THAT WOULD BE OF ASSISTANCE TO THE SCHOOL**

|  |
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WHEN SUBMITTING THIS APPLICATION FOR ENROLMENT FORM TO SCOIL MUIRE, PLEASE ENSURE THAT YOU INCLUDE THE FOLLOWING WITH YOUR APPLICATION:

- a copy of your child's **Birth Certificate**
- **Proof of Address** at the time of application

*Failure to provide these documents will render an application incomplete.*