

Scoil Bhaile Nua

Baile Nua, Maigh Cuílinn, Co. na Gaillimhe H91 F6T7

Uimhir Rolla: 15331H
Ríomhphost: eolas@scoilbhailenua.ie

Teileafón: (091) 555 040
Suíomh: www.scoilbhailenua.ie



Iarratas Iontrála Application for Admission

Ainm An Pháiste <i>Child's Name</i>		Dáta Breithe <i>Date Of Birth</i>	Lá <i>Day</i>	Mí <i>Month</i>	Bliain <i>Year</i>
Rang don Iontráil <i>Class for which admission is sought</i>		Dáta Tosaithe <i>Start Date</i>			
Seoladh Baile an pháiste ar dáta iarratais <i>Child's home address on date of application</i>		Gnéas <i>Gender</i>	Fireann (✓) <i>Male</i>	Baineann (✓) <i>Female</i>	
Éircód <i>Eircode</i>		Uimhir PPS An Pháiste <i>Child's PPSN</i>	☐	☐	
Tír Bhreithe <i>Country Of Birth</i>		Náisiúntacht <i>Nationality</i>			
Creideamh an pháiste <i>Child's religion</i>					
Cead creideamh an pháiste a inchur ar an mBunachar Sonraí bunscoil <i>Consent to child's religion on the Primary Online Database</i>			Tá/Yes (✓)	Níl/No (✓)	
			☐	☐	
Cúlra Eitneach an pháiste <i>Child's Ethnic Background</i>					

Eolas maidir le Réamhscoil nó Scoileanna Eile Information relating to Preschool or Other Schools

Ainm agus Seoladh na Réamhscoile/Scoile is déanaí <i>Name and Address of last attended Preschool or School</i>			
Uimh. Ghutháin <i>Phone Number</i>		Seoladh Ríomhphoist <i>Email Address</i>	
An fáth go bhfuil an páiste ag fágáil na scoile/ réamhscoile <i>Reason the child is leaving the school/preschool (✓)</i>			
Ag céimiú ón réamhscoil <i>Graduating from preschool</i>	☐	Díbeartha ón scoil/ réamhscoil <i>Expelled from the school/ preschool</i>	☐
Ag cur fúinn i gceantar na scoile <i>Taking up residence in the school area</i>	☐	Fáth eile (tabhair sonraí) <i>Other reason (give details)</i>	☐

Sonraí Tuismitheoir/Caomhnóir Dleathach 1 PARENT/LEGAL GUARDIAN 1 DETAILS		Sonraí Tuismitheoir/Caomhnóir Dleathach 2 PARENT/LEGAL GUARDIAN 2 DETAILS	
Ainm Name		Ainm agus Sloinne Name & Surname	
Sloinne Surname		Sloinne Réamhphósta Maiden Name	
Náisiúntacht Nationality		Náisiúntacht Nationality	
Slí Bheatha/Láthair Oibre Occupation/Workplace		Slí Bheatha/Láthair oibre Occupation/Workplace	
Uimhir Ghutháin Oibre Work Phone No.		Uimhir Ghutháin Oibre Work Phone No.	
Seoladh Baile Home Address		Seoladh Baile Home Address	
Uimhir Ghutháin Phone Number		Uimhir Ghutháin Phone Number	
Guthán Soghluaiste Mobile Phone		Guthán Soghluaiste Mobile Phone	
Seoladh Ríomhphoist Email Address		Seoladh Ríomhphoist Email Address	

Teagmhálacha i gCás Éigeandála (Muna Mbhfuil Tuismitheoirí/ Caomhnóirí Ar Fáil) Emergency Contacts (If Parents/Guardians Are Unavailable)			
Ainm Name		Ainm Name	
Uimhir Ghutháin Phone number		Uimhir Ghutháin Phone Number	
Seoladh Home Address		Seoladh Home Address	
Gaol leis an bpáiste Relationship to child		Gaol leis an bpáiste Relationship to child	
Daoine eile atá údaraithe chun an páiste a bhailiú ón scoil Other person authorised to collect the child from school			
Ainm Name		Ainm Name	
Uimhir Ghutháin Phone number		Uimhir Ghutháin Phone number	
Seoladh Home Address		Seoladh Home Address	
Gaol leis an bpáiste Relationship to child		Gaol leis an bpáiste Relationship to child	

Ceangailt leis an scoil Connection to the school							
Deartháireacha/Deirf iúracha sa Scoil Faoi Láthair <i>Siblings Currently In The School</i>	Ainm <i>Name</i>			Rang <i>Class</i>			
	Ainm <i>Name</i>			Rang <i>Class</i>			
	Ainm <i>Name</i>			Rang <i>Class</i>			
Dearthair/Deirfiúr Sa Scoil Roimhe Seo <i>Sibling Formerly In The School</i>	Ainm <i>Name</i>			Ó/From		Go/To	
	Ainm <i>Name</i>			Ó/From		Go/To	
	Ainm <i>Name</i>			Ó/From		Go/To	
Ar Fhreastail Tuismitheoir Ar An Scoil Seo? <i>Did A Parent Attend This School? (✓)</i>	Athair Father	☐	Máthair Mother	☐	Beirt Both	☐	
Blianta a d'fhreastail siad <i>Years Attended</i>	Ó/From	Go/To	Ó/From	Go/To	Ó/From	Go/To	

Sealbhú Teanga Language Acquisition							
Teanga A Labhraítear Sa Bhaile <i>Language Spoken At Home</i>							
Líofacht Sa Ghaeilge (Cur Tic Sa Bhosca Cuí) <i>Fluency In Irish (Tick The Appropriate Box)</i>	An Páiste <i>Child</i>		An tAthair <i>Father</i>		An Mháthair <i>Mother</i>		
Cainteoir Dúchais <i>Native Speaker</i>	☐		☐		☐		
Go Breá Líofa <i>Very Fluent</i>	☐		☐		☐		
Cuíosach Líofa <i>Reasonably Fluent</i>	☐		☐		☐		
Tuiscint Bhunúsach <i>Basic Understanding</i>	☐		☐		☐		
Gan Ghaeilge Ar Bith <i>No Irish</i>	☐		☐		☐		
I do thuairimse, an bhfuil aon riachtanais teanga ag an bpáiste? Más é do thuairim go bhfuil, tabhair sonraí. (✓) <i>In your opinion, does the child have any language needs? If so, please provide details (✓)</i>	Tá/Yes	☐	Níl/No	☐	B'feidir/Maybe	☐	

Iarratais chuig scoileanna eile Application to other schools		
Sonraí maidir le hiarratais cláraithe curtha chuig scoileanna eile <i>Details of applications made for enrolment submitted to other schools</i>		
Ainm agus Seoladh na Scoile <i>Name and Address of school</i>	Seoladh ríomhphoist <i>School email</i>	Uimhir Ghutháin <i>Phone number</i>
Ar cuireadh áit sa scoil ar fáil duit? (✓) <i>Has a place in the school been offered to you? (✓)</i>	Tá Yes	Níl No
	☐	☐

Eolas Sláinte Health Information	
Cuir eolas ar fáil maidir leis an eolas sláinte seo a leanas. Scríobh ‘Níl’ mura bhfuil feidhm aige. Please provide information regarding the following health information. Please write ‘None’ if not applicable	
Ríochtaí sláinte/ Bia/ Ailléirgí Medical/ Health/ Dietary/ Allergy Issues	
Leigheas Forordaithe le coinneáil ar scoil Prescribed medicine to be kept at school	
Ailléirge le leigheas Allergy to medicine	
Dochtúir an Pháiste Child’s Doctor	
Uimhir Ghutháin an Dochtúra Doctor’s phone number	
Seoladh an dochtúra Address of doctor’s surgery	

Measúnaithe Assessments		
Le do thoil, tabhair sonraí ar aon mheasúnuithe nó tuairiscí a rinneadh ar an bpáiste. Tabhair faoi deara le do thoil go gcaithfear cóipeanna d’aon mheasúnuithe a dhéantar a sholáthar do Scoil Bhaile Nua, nuair a chláraítear an páiste. Please give details of assessments or reports done, if any. Please note that copies of any assessments done must be supplied to Scoil Bhaile Nua upon enrolment.		
Measúnú Assessment	Duine Gairmiúil/ Gníomhaireacht Professional/Agency	Dáta Date
Teiripe Urlabhra Measúnú / Tuairisc Speech Therapy Assessment/Report		
Measúnú/ Tuairisc ó Theiripe Saothair Occupational Therapy Assessment/Report		
Measúnú/ Tuairisc Siceolaíochta Oideachais Educational Psychological Assessment/Report		
Aon Iarrtais/ Atreoruithe/Measúnithe/ Tuairiscí eile Any Other Applications/Referrals/Assessments/Reports		

Toiliú agus Admháil Acknowledgement and consent	Toilim Yes	Ní thoilim No
Tugaim cead do fhoireann na scoile, garchabhair bhunúsach a thabhairt do mo pháiste i gcás timpiste a bheith aige / aici, gortú a fháil nó éirí tinn. <i>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>	☐	☐
Tugaim cead mo pháiste a thabhairt ag an dochtúir nó ospidéal i gcás timpiste nó éigeandáil leighis agus go bhfaighfidh sé/sí cibé leighis nó cóireáil leighis de réir mar a mheasanna an lucht leighis atá riachtanach. <i>I consent to my child being brought to the Doctor or a Hospital in the event of an accident or medical emergency and to his/her receiving such treatment and being administered medicine as medical personnel consider necessary. Every effort will be made to contact you beforehand.</i>	☐	☐
Tugaim cead do fhoireann na scoile mo pháiste a athrú sa chás go bhfuil sé/sí fliuch nó salach de bharr titim nó timpiste leithris, i gcomhréir le Measúnú Riosca Cosanta Leanaí na scoile, nuair nach bhfuil mo pháiste in ann. <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 Child Protection Risk Assessment, where my child is unable to do so.</i>	☐	☐
Tugaim cead cibé scagthástáil oideachais / acadúil agus tástálacha diagnóiseacha a mheasann an scoil a bheith á riaradh ar mo pháiste chun tacú lena c (h) uid forbartha oideachais. <i>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>	☐	☐
Tugaim cead do rannpháirtíocht mo pháiste le hardáin teagaisc agus foghlama atá bunaithe ar an idirlíon agus atá roghnaithe ag an scoil (m.sh. Seesaw, Webex, srl) <i>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, Webex, etc)</i>	☐	☐
Tugaim cead grianghraif/físeáin/obair mo pháiste a thaifeadadh agus a fhoilsiú ar shuíomh gréasáin na scoile, nuachtlitir na scoile, foilseacháin inscoile, ardáin ar líne atá in úsáid ag an scoil (Databiz, Seesaw, srl) agus foilseacháin a cheadaíonn an scoil. <i>I consent to photographs/videos/work of my child being recorded and published on the school's website, school newsletter, in-school publications, online platforms in use by the school (Databiz, Seesaw, etc) and publications approved by the school.</i>	☐	☐
Tugaim cead do mo pháiste páirt a ghlacadh agus dul chuig imeachtaí scoile ar nós Ceardlanna, Turais Scoile, Cuairteanna, Imeachtaí Spóirt, Cór na Scoile &rl. <i>I consent to my child's participation in activities such as Workshops, School Tours, Outings, Sporting Events, School Choir, etc.</i>	☐	☐
Tugaim cead do mo pháiste taisteal chuig turais scoile, comórtais, imeachtaí spóirt, srl., ar bhus nó i gcarr, i gcás ina n-eagraíonn an scoil an t-iompar agus i gcomhréir le Nósanna Imeachta na Scoile um Chosaint Leanaí. <i>I consent to my child travelling to outings, competitions, sporting events, etc., by bus or by car, where transport is organised by the school and in accordance with the school's Child Protection Procedures.</i>	☐	☐
Tugaim cead do mo pháiste páirt in obair ghrúpa agus/nó obair duine le duine leis an Múinteoir Oideachais Speisialta/Cúntóir Teanga, nó go bhfaighidh sé/sí tacaíocht uathu. Áireofar leis seo obair le páistí i ngrúpaí agus duine le duine, sa seomra ranga agus lasmuigh den seomra ranga. <i>I consent to my child participating in or being supported in group work and/or one-to-one work with the Special Education Teacher/Cúntóir Teanga. This will include working with children in groups and one-to-one in the classroom and outside of the classroom.</i>	☐	☐
Tugaim cead go gcuirfear m' uimhir fón póca le grúpa WhatsApp (nó ardán mar é) faoi bhainistiú na scoile, chun eolas tábhachtach scoile ar nós foláirimh aimsire, dúnadh éigeandála agus fógraí práinneacha riaracháin eile a scaipeadh. Tuigim gur grúpa aontreo a bheidh ann, nach roinnfidh ach an scoil eolas ann, agus go mbeidh m' uimhir fón póca le feiceáil ag baill eile an ghrúpa. Ní úsáidfear é seo ach amháin nuair nach féidir DataBiz a úsáid. <i>I consent to my mobile phone number being added to a school-managed WhatsApp (or similar platform) group for the purpose of receiving important school information, including weather warnings, emergency closures and other urgent administrative notices. I understand that the group will be one-way, with information shared by the school only, and that my mobile number will be visible to other group members. This will only be used in times where DataBiz cannot.</i>	☐	☐

Toiliú agus Admháil: Polasaithe na Scoile Acknowledgement and consent: School Policies	Toilim Yes	Ní thoilim No
Tá Cód Iompair na scoile léite agam agus glacaim leis agus déanfaidh mé gach iarracht a chinntiú go gcomhlíonfaidh mo pháiste an rud céanna. <i>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>	☐	☐
Tá an Polasaí Bí Cineálta (Polasaí Frithbhulaíochta na Scoile) léite agam agus glacaim leis agus aontaím cloí leis. <i>I have read and accept the school's Bí Cineálta Anti-Bullying Policy and agree to abide by same.</i>	☐	☐
Tá Polasaí Úsáide Inghlactha na scoile léite agam agus glacaim leis agus aontaím cloí leis. <i>I have read and accept the school's Acceptable Use Policy and agree to abide by same.</i>	☐	☐

Glacadh Acknowledgement
Tuigim go stórálfar an fhaisnéis ar an bhfoirm seo ar bhunachar sonraí na scoile agus ar Bhunachar Sonraí Ar Líne na Bunscoile de chuid na Roinne Oideachais. <i>I am aware that the information on this form will be stored on the school's database and the Department of Education's Primary Online Database.</i>
Admhaím agus glacaim leis go roinneann an scoil ainmneacha agus sonraí teagmhála na ndaltaí leis an HSE chun vacsaínithe, scagthástáil éisteachta agus radhairc, agus scrúduithe fiacloireachta a eagrú. <i>I acknowledge and accept that the school shares pupil names and contact details with the HSE for the purpose of scheduling vaccinations, hearing and vision screening and dental examinations.</i>
Admhaím go gceadaíonn an tAcht um Leas Oideachais, 2000 (Alt 28), agus na Rialacháin um Chomhlachtaí Forordaithe, 2005, do scoileanna faisnéis ábhartha a bhaineann le páiste atá ag aistriú idir ár scoil agus scoil aitheanta eile a roinnt gan sárú a dhéanamh ar an dlí um chosaint sonraí. <i>I acknowledge that The Educational Welfare Act 2000 (section 28) and the Prescribed Bodies Regulations 2005 allows schools to share relevant information concerning a child transferring between our school and another recognised school without breaching data protection law.</i>
Admhaím agus glacaim leis go múineann an scoil an Clár Bí Sábháilte agus an Clár um Chaidrimh agus Gnéasacht, ar cláir iad araon atá mar chuid de Churaclam an Oideachais Shóisialta, Phearsanta agus Sláinte de chuid na Roinne Oideachais agus Scileanna. <i>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 and Skills Social and Personal Health Education Curriculum.</i>
Geallaim go ndéanfaidh mé gach iarracht a chinntiú go bhfreastalóidh mo pháiste ar an scoil go rialta agus go poncúil. <i>I will undertake to see that my child will attend school regularly and punctually.</i>

Dearbhú Declaration			
Tá polasaithe na scoile léite agam agus glacaim leis agus aontaím cloí leis. Tá na toilithe agus na admhálacha thuas léite agus intuigthe agam. Tá leabhrán eolais na scoile atá ar fáil ar shuíomh Gréasáin na scoile agus i gcóip chrua ó oifig na scoile, léite agus intuigthe agam agus geallaim go gcomhlíonfaidh mé féin agus mo pháiste rialacha agus polasaithe uile na scoile. Is mian liom iarratas a dhéanamh do mo pháiste ar cead isteach do Scoil Bhaile Nua. <i>I have read and understood the above consents and acknowledgments.</i> <i>I have read and understood the school's information booklet which is available on the school's website and in hard copy from the school office and I undertake that I and my child will comply with all school rules and policies.</i> <i>I wish to apply for the admission of my child to Scoil Bhaile Nua.</i>			
Síniú Tuismitheora/Caomhnóra Parent's/Guardian's Signature		Dáta Date	
Síniú Tuismitheora/Caomhnóra Parent's/Guardian's Signature		Dáta Date	

Seol na nithe thíos le d'iarratas le do thoil/ Please provide the following with the application form

- Cóip de theastas breithe an pháiste**
Copy of child's birth certificate
- Cruthúnas ar sheoladh ag am an iarratais**
Proof of address at the time of application

Caithfear na doiciméid seo a sholáthair, chun iarratas iomlán a chomhlíonadh.

Failure to provide these documents will render an application incomplete.