



Trinity Primary School Enrolment Request Form



Child					
Name:		Surname:		Male	Female
Address:		Nationality:			
		First Language:			
Eircode:					
Date of Birth:		PPS:			
Parents					
Mothers Name:		Fathers Name:			
Phone:		Phone:			
Occupation:		Occupation:			
Email:		Email:			
Education					
Previous schools attended including preschool					
Year	School	Address	Class	Reason for leaving	
Education Information					
Has your child been assessed by		Yes	No		
Educational Psychologist?					
Speech Therapist?					
Occupational Therapist?					
other (please specify):					
Additional Pupil Information					
Number of children in family:		Placing of Child 1 st , 2 nd etc.):			
Please inform the school if you are a legal guardian rather than a parent					

Medical			
	Yes	No	Specify
Does your child suffer from any illness?			
Does your child suffer from any allergy?			
Is your child taking any medication?			
Emergency Contact Numbers			
Doctor's Name	Address		Phone Number
Please list at least 1 emergency contact name / number (other than those listed overleaf) that the school can contact in the event of an emergency.			
Policy on Medical Assistance			
In the event of an accident / emergency occurring and the school being unable to contact any of the numbers above or overleaf, it is the policy of the school to seek medical attention for the injured party.			

Agreement		✓
Trinity P.S. is a multi campus school with classes and groups using facilities in each campus. I give permission for my child to go, while accompanied, to each campus. (All 3 buildings are located close to each other)		
I will abide by and support the school's policies		
I will abide by and support the school's Code of Behaviour		
I will abide by and support the school's Anti-bullying Policy		
I will abide by and support the school's Child Protection Guidelines		
I will abide by and support the school's Substance Abuse Policy		
I realise that policies can be updated from time to time including our IT policy and SPHE policy and guidelines.		
I agree to allow my child's photo to be used as part of school based activities which may appear on the school's social media sites. (The school never displays a child's name with a photo)		

Signature of Parent(s)

Mother: _____ Date: / /

Father: _____ Date: / /

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.

Please Note:

1. Birth Certs and PPS must be supplied with the completed Enrolment Request Form.

2. Ethnic and cultural background can be a sensitive area. However the Department of Education and skills require that schools share this information with them on their Primary Online Database. Please tick as appropriate below to allow the school to share the information with the Department of Education.

To which ethnic or cultural background group does your child belong (please tick one)?

(Categories are based on the Census of Population)

White Irish ☐ Irish Traveller ☐ Roma ☐

Other White Background ☐ Black or Black Irish - African ☐

Black or Black Irish - Any other Black Background ☐ Asian or Asian Irish/Chinese ☐

Asian or Asian Irish - Any other Asian background ☐

Other (inc. mixed background) ☐ No consent ☐

Trinity P.S. Tuam

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