



Saint Brigid's National School, Turret Road, Palmerstown, Dublin 20.

Principal: A.O'Shea Roll 18324C

RCN 20119751

Tel: 01 626 5431

Email: stbrigidsgns@gmail.com

Website: www.stbrigidspalmerstown.com

Application for Admission 2024/2025 (Please complete front and back)

NON SENSITIVE DATA FOR OFFICE USE & TRANSFER TO DEPARTMENT OF EDUCATION PRIMARY ONLINE DATABASE (POD)

Child's First Name: _____ (As per Birth Certificate)	Date of Birth: _____
Child's Surname: _____ (As per Birth Certificate)	PPS No: _____
Address: _____ _____ _____	Nationality: _____
EIRCODE: _____	If your child was born outside of Ireland please indicate the year of arrival in Ireland: _____
Class that admission is being sought for: _____ (Junior Infants – 6 th Class/AS Class "The Orchard")	Is English or Irish spoken at home? English: Yes / No Irish: Yes / No If 'No' to both please name which language(s) are spoken in the home: _____

CONTACT DETAILS PROVIDED WILL BE USED AND STORED BY SCHOOL OFFICE FOR COMMUNICATION PURPOSES

Mother's Name: _____	Father's Name: _____
Mobile No.: _____ Work No.: _____	Mobile No.: _____ Work No.: _____
Number of children in family: _____	Position in family: _____
Name of sisters (if any) in St. Brigid's Girls National School Name: _____ Class: _____	Religion: _____
Name of brothers (if any) in St. Lorcan's Boys National School Name: _____ Class: _____	Name/Address of school/preschool: _____
<input type="checkbox"/> Early Start <input type="checkbox"/> Montessori <input type="checkbox"/> Playschool <input type="checkbox"/> Previous Primary School (if non junior)	Present Class Level (if non junior): _____
I give permission to the Principal/Relevant Teacher of St Brigid's GNS to discuss the needs of my daughter with the Manager/Principal/Relevant Teacher of the school/preschool listed above: Yes / No Please circle yes or no.	
Where relevant, I give permission to the Principal of St Brigid's GNS to discuss the needs of my daughter with the SENO, including the transfer of professional reports etc. to the SENO to ascertain eligibility for admission into the AS Class: Yes / No Please circle yes or no.	
Does your daughter have Special Needs or health problems / Learning/Emotional/Behavioural/ Speech and Language etc.? If so, please specify and attach applicable reports. For applications for the AS Class "The Orchard", please see the Admissions Policy for required documentation.	

Does a legal order exist or is there a legal agreement in relation to guardianship? Yes No
Please give details / Include copies of relevant court orders

Please indicate any medical information, condition or allergies your daughter may have that the school should be aware of:

Signed: _____
Parent(s)/Guardian(s)

Date: _____



Saint Brigid's Girls' National School, Turret Road, Palmerstown, Dublin 20.

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SENSITIVE DATA FOR TRANSFER TO DEPARTMENT OF EDUCATION PRIMARY ONLINE DATABASE (POD)

Child's Name: _____	Child's date of birth: _____
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Please indicate which of the following applies to your child. Please tick one option in each section.

RELIGION – Please tick only **ONE** of the following

Roman Catholic <input type="checkbox"/>	Church of Ireland <input type="checkbox"/>	Jewish <input type="checkbox"/>
Methodist, Wesleyan <input type="checkbox"/>	Presbyterian <input type="checkbox"/>	Hindu <input type="checkbox"/>
Muslim (Islamic) <input type="checkbox"/>	Orthodox (Greek, Coptic, Russian) <input type="checkbox"/>	Buddhist <input type="checkbox"/>
Jehovah's Witness <input type="checkbox"/>	Apostolic or Pentecostal <input type="checkbox"/>	Lutheran <input type="checkbox"/>
Atheist <input type="checkbox"/>	Baptist <input type="checkbox"/>	Agnostic <input type="checkbox"/>
No Religion <input type="checkbox"/>	Other Religions <input type="checkbox"/>	No Consent <input type="checkbox"/>

ETHNIC/CULTURAL BACKGROUND – Please tick only **ONE** of the following

White Irish <input type="checkbox"/>	Irish Traveller <input type="checkbox"/>
Roma <input type="checkbox"/>	Any other White Background <input type="checkbox"/>
Black African <input type="checkbox"/>	Any other Black Background <input type="checkbox"/>
Chinese <input type="checkbox"/>	Any other Asian Background <input type="checkbox"/>
Other (incl. Mixed Background) <input type="checkbox"/>	No Consent <input type="checkbox"/>

I consent for this information to be stored on the Primary Online Database (POD) and transferred to the Department of Education and Skills and any other primary schools my child may transfer to during the course of their time in Primary School.

Signed: _____
Parent(s)/Guardian(s)

Date: _____