



Claddaghduff N.S`
Scoil Mhuire Gan Smál,
Claddaghduff,
Co. Galway
H71 YF76

Telephone: 095-44334
Website: www.claddaghduffns.ie
Email: info@claddaghduffns.ie
Roll no: 18608Q

Claddaghduff N.S

Enrolment Form 2025/2026

Surname:		First Name:	
Address: <i>(please include postcode)</i>		Date of Birth:	
PPS Number:	Nationality:	Religion:	
Baptised:	Yes / No If your child has been baptised please enclose a copy of Baptismal Cert		
Fathers Name:	Mothers Name:		
Fathers contact phone number and email:	Mothers contact phone number and email:		
Address: <i>(if different from child)</i>			
Medical Information:	Does your child suffer from any illness that the school should be aware of?		
Allergies:	Medication:		
Do you give permission to take your child straight to hospital in case of a serious illness/accident? Yes: _____ No: _____			
Doctors Name:		Phone:	
Playgroup/ Crèche your child attended:			
If parents / guardians are not available- Contact details: 1. _____ 2. _____			
Does your child have any special learning needs? If yes, please give details _____ _____			
Do you consent to your child to receive Support Teaching if deemed necessary? Yes _____ No _____			
- Children with Special Educational Needs will be resourced in accordance with the level of resources provided by the Department of Education and Skills. -All children in Claddaghduff N.S are required to abide by the Code of Behaviour at all times.			



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GENERAL CONSENT FORM

During the course of the school year it is necessary for your child's teacher to take his/her pupils out of the school grounds for various activities e.g. walks to Omey strand and other walks in our local environment as part of our Science programme, visits to the church to attend mass/ rehearse for sacrament preparation for First Confession, First Communion, Choir, Carol singing, etc.

I hereby give my child's teacher consent to take my child on local trips outside the school grounds during school times.

My child's name is: _____

Class: _____

Parent / Guardian's Signature: _____

Date: _____

PHOTOGRAPHY CONSENT FORM

Our school likes to celebrate your child's work and achievements. As a result, images of your child and his/her work may appear on our website.

I, _____(PRINT NAME)

Parent/guardian of _____(PRINT NAME)

hereby: grant permission (YES) (NO) to Claddaghduff N.S to take and use photographs and/or digital images of my child for use in printed publications or materials, electronic publications, school website and classroom displays for the duration of his/her time in the school.

Parents / Guardian's Signature: _____

Date: _____



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Pupil Information required for the Department of Education and Skills Primary Online Database

The Department of Education and Skills is developing an electronic database of primary school pupils called the Primary Online Database (POD) which will involve schools maintaining and returning data on pupils to the Department at individual pupil level on a live system. The database will allow the Department to evaluate progress and outcomes of pupils at primary level, to validate school enrolment returns for grant payment and teacher allocation purposes, to follow up on pupils who do not make the transfer from primary to post primary level and for statistical reporting.

The database will hold data on all primary school pupils including their PPSN, First Name, Surname, Name as per Birth Certificate, Mother's Maiden Name, Address, Date of Birth, Gender, Nationality, whether one of the pupil's mother tongues is English or Irish, whether the pupil is in receipt of an Exemption from Irish and if so the reason for same, whether the pupil is in receipt of Learning Support and if so the type of learning support, whether the pupil is in a Mainstream or Special Class. The database will record the class grouping and standard the pupil is enrolled in. The database will also contain, on an optional basis, information on the pupil's religion and on their ethnic or cultural background. **In order to assist with the gathering of data please complete page one and two of this form in CAPITAL LETTERS and return to the school. The second page of this form will be retained by Claddaghduff National School.**

Teacher/Class Name: _____

Current Class: Junior Infants Senior Infants
(please circle) First Class Second Class
Third Class Fourth Class
Fifth Class Sixth Class

Pupil Forename: _____

Pupil Surname: _____

PPSN of Pupil: _____

Pupils Date of Birth: _____

Pupil's Gender: Male/Female

Mother's Maiden Surname: _____

Birth Cert Forename: (if different from name above) _____

Birth Cert Surname: (if different from name above) _____

Pupil Address: _____

_____ Eircode: _____

Nationality: (In the case of dual citizenship where Irish is one, please choose Irish) _____

Is one of the pupil's mother tongues (i.e. language spoken at home) Irish or English? Yes No



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Pupil Information requested for Department of Education and Skills Primary Online Database

The department has consulted with the Data Protection Commissioner in relation to the collection of individual pupil information for the Primary Online Database. Both religion and ethnic and cultural background are sensitive personal data categories under Data Protection legislation, these questions are optional. While these questions are optional, the information would be very useful to the Department for statistical and research purposes. Aggregated information on Ethnic/Cultural background will be used to track the progress of these groups, and to compare their progress with other groups, thereby identifying gaps in the system and assisting in the development and implementation of appropriate policies and interventions. Enhance capitation in respect of pupils who are members of the Traveller Community will be paid to schools on the basis of the answers to this question. Aggregated information on religion will be used for statistical purposes only. Parents/guardians are asked, if they wish to do so, to identify their children's religion and ethnic background, and to consent for this information to be transferred to the Department of Education and Skills. This page of the form will be retained by your primary school.

To which ethnic or cultural background group does your child belong to (please circle one)? (Categories based on Census of Population)

White Irish	Irish Traveller	Any other White Background	Roma
African	Black or Black Irish	Any other Black Background	Polish
Asian or Asian Irish-Chinese		Any other Asian Background	Ukrainian
Other (including mixed background)		No consent	

What is your child's religion (please circle)?

Roman Catholic	Church of Ireland	Presbyterian	Orthodox	Jewish
Muslim (Islamic)	Methodist, Wesleyan	Lutheran	Apostolic or Pentecostal	
Buddhist	Jehovah's Witness	Atheist	Baptist	Agnostic
Other Religion	No Religion	No consent		

I consent for the sensitive personal data in the two questions above 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/Guardian) Date: _____

Please complete this form and return to your primary school.
For further information on POD please go to the Dept. of Education and Skills' website:
www.education.ie