

Our Lady of Mercy National School, Stradbally, Co. Waterford.
Enrolment Application Appendix

The following section of this enrolment form is optional and will not affect your child's enrolment.

Data Protection.

The information provided in this form is necessary for the work of the school and is **confidential** to the school.

Health Screening.

From time to time the school is asked to provide information to the Health Board to facilitate their work such as immunisations, sight and hearing tests and dental appointments etc. Please sign below to indicate your agreement that the Child's Personal Details be made available to the Health Board.

Signature _____

Date _____

Learning Support

During your child's time in Our Lady of Mercy N.S he/she may benefit from learning support as part of a class group with the Learning Support teacher. Please sign below to give your permission for your child to participate in this class group if deemed necessary.

Signature _____

Date _____

Photographs of Pupils

In keeping with child protection requirements please indicate whether you give permission for your daughter's/son's photograph to be taken and used in school publications, newspapers and/or the school website in connection with school activities.

Signature _____

Date _____

Internet Permission

I have read the Internet Acceptable Use Policy on the website and grant permission for my child to access the internet. I understand that school internet usage is for education purposes only and that every reasonable precaution will be taken by the school to provide for online safety.

Signature _____

Date _____

Stay Safe Programme/RSE Programme

I understand that participation in the Stay Safe Programme is compulsory and accept my child's participation in the Stay Safe/RSE Programmes.

Signature _____

Date _____

Legal Requirements

If there is any relevant legal documentation we should have please give details and supply a copy e.g Guardianship, Barring Orders, Access etc.

Board Of Management

Furthermore, names of parents may need to be circulated to all parents to facilitate Board Of Management elections. Please sign below to indicate that you agree to this.

Signature _____

Date _____