



## Application for Admission: Transfer Pupils

Transfer Application for School Year: \_\_\_\_\_

### Pupil Details

First Name							
Surname (as on birth certificate)							
Name as commonly used (if different from above)							
Date of Birth (dd/mm/yyyy)							
Gender	Male: <input type="checkbox"/>			Female: <input type="checkbox"/>			
Nationality							
PPSN Number							
Address:							
Eircode:							
Proposed date of entry to Scoil Barra (dd/mm/yyyy):							

### Details of Parents/Guardians

	Parent/Guardian 1	Parent/Guardian 2
Title (e.g. Mr/Ms/Mrs etc.)		
First Name		
Surname		
Address		
Eircode:		



Telephone Number:		
Use this number for Text-A-Parent (Please tick)	<input type="checkbox"/>	<input type="checkbox"/>
Email Address:		
Relationship to pupil:		

**Family Details**

With whom does the child normally reside?			
Number of Children in Family:			
Birth Order of this Child in Family:			
Contact Details of other significant contacts			
	Name	Phone Number	Relation/Role
Contact 1:			
Contact 2:			
Contact 3:			
Contact 4:			

**Pupil Details continued**

Previous School Attended		
	Name, Address	Years Attended
School 1:		
School 2:		
Most recent class attended: (current class level)		
Did your child receive any additional support in their previous school?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details: (e.g. SNA support, support teaching, subjects supported)		



Information: Additional Needs		
Does your child have any difficulties which might affect his/her performance in school?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details:		
Please give details of any social/emotional difficulties which may affect your child in school:		
Has your child been referred for additional support services? For example, assessment of need (AON) application, speech therapist, psychologist, occupational therapist, social worker or other specialist?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details:		
Is there a report available from this support service? *	Yes <input type="checkbox"/>	No <input type="checkbox"/>
*Note: if a report is available, please provide a copy for the school with this form.		

English as an Additional Language		
Language(s) spoken in the home:		
Does your child understand English?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does your child speak English?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Medical Information		
Does your child have any medical condition/allergy which may affect your child in school?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details:		



Any concerns around your child's hearing, sight or speech development: (please mention if your child wears glasses or uses a hearing aid)	
Name of Family Doctor:	
Contact Number of Family Doctor:	

**Please note:** All arrangements and details regarding enrolment and school admissions can be found in Scoil Barra's Admissions Policy. This policy can be found on the school website at <https://www.scoilbarra.ie/enrolment/>. A copy of this policy may also be requested from the school at the contact details above. As per this Admissions Policy, transfer applications must be renewed yearly. This renewal is the responsibility of parents/guardians.

**Signatures of Parents/Guardians:** *If this Application is being submitted by hand/by post, the handwritten signature of the parent(s)/guardian(s) is/are required. If the Application is being submitted online, then a scanned copy of the parent(s)/guardian(s) signature will be accepted on the condition that the signature provided is capable of identifying the parent(s)/guardian(s) of the child.*

_____	_____
<b>Parent/Guardian 1</b>	<b>Date</b>
_____	_____
<b>Parent/Guardian 2</b>	<b>Date</b>

Thank you for providing the information requested in this 'Application for Admission'. The information supplied will assist us in supporting your child if/when he/she is enrolled as a pupil in Scoil Barra. The information will be treated as private and confidential and will be released to staff members on a need-to-know basis only. Please note that if your child enrolls in the school, we are required to enter his/her information details on to the Department of Education and Skills' Primary Online Database (POD). Information regarding POD may be found on [www.education.ie](http://www.education.ie)

**\*N.B.\*:** The school will acknowledge receipt of Application by return email (if sent by email) or by post (if sent by post). If you do not receive acknowledgement of receipt your application, please contact the school to notify us in the event that your application was not received by the school.

<i>For Office Use Only:</i>	
<i>Date Transfer Application Received:</i>	
<i>Confirmation of receipt application sent on (date):</i>	
<i>Confirmation of receipt of application sent by:</i>	Phone <input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/>