

# S.N. Béal Átha Gabhann

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## Registration of New Pupils Year 2023-2024

The Department of Education and Skills has developed an electronic database of primary school pupils called the Primary Online Database (POD) which involves schools maintaining and returning data on pupils to the Dept at individual pupil level on a live system. This information will be used 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. The database will also contain, **on an optional basis**, information on the pupil's religion and on their ethnic or cultural background. The data required for POD is marked with an **asterisk \*** and will only be uploaded to POD **if your child is enrolled**. All other data we need for the efficient running of the school. **In order to assist with the gathering of data please complete the form in CAPITAL LETTERS and return to the school. This form will be retained by the school.**

\*Pupil First Name: \_\_\_\_\_ \*Pupil Surname: \_\_\_\_\_

\*Birth Cert First Name (if different from above) \_\_\_\_\_  
\*Birth Cert Surname (if different from above) \_\_\_\_\_

\*Pupil Address: \_\_\_\_\_

\*Eircode: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ \*PPS No: \_\_\_\_\_ \*Gender Male [ ] Female [ ]

\*Nationality: \_\_\_\_\_ \*County: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

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

\*Religion \_\_\_\_\_

Do you consent to uploading data relating to religion to POD Yes [ ] No [ ]

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

White Irish [ ] Irish Traveller [ ] Roma [ ] Black African [ ] Other White Background [ ]  
Any other Black Background [ ] Chinese [ ] Any other Asian Background [ ]  
Other (inc. mixed background) [ ]

Do you consent to uploading data relating to ethnicity to POD Yes [ ] No [ ]

PTO/.....

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The following information is required for the efficient running of the school and will not be uploaded to POD

Mother's Name \_\_\_\_\_ Tel No. \_\_\_\_\_ Occupation \_\_\_\_\_

Father's Name \_\_\_\_\_ Tel No. \_\_\_\_\_ Occupation \_\_\_\_\_

Emergency contact persons and telephone numbers (other than the above).

• Name \_\_\_\_\_ Tel. \_\_\_\_\_

• Name \_\_\_\_\_ Tel. \_\_\_\_\_

Irish Version of Child's Name: \_\_\_\_\_

*(Otherwise school will translate)*

Does any legal order under family law exist that the school should know about?

\_\_\_\_\_  
*(Please note if this situation changes the school must be informed in writing)*

Please list any pre-schools or schools previously attended:

## Any Other Useful Information

- For instance, list any problems the child may have in relation to health, (allergies, epilepsy, asthma, sight, hearing, speech, fainting, etc), toilet-training, inability to cope with buttons, laces etc.
- The school should be made aware of any Early Intervention or Assessments that your child may have received. Please provide copies of any relevant reports/assessments.
- The school should be made aware of any court order, which affects the child's welfare and also the name of any person into whose custody the child should not be given.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please make the school aware as early as possible of any family situation such as bereavement, or separation that could impact on your child, so that we can be as supportive as possible.

Please answer YES or NO to the following *(please circle as appropriate)*:

- Our child is allowed to take part in the Relationships & Sexuality Education (RSE) Programme: YES : NO
- Our child is allowed take part in The Stay Safe Programme: YES : NO
- Our child can be taken to hospital in case of emergency if we cannot be contacted: YES : NO

PTO/.....

- Inclusion of our child's photographs in School Newsletters or a local/national newspaper: **YES : NO**
- Parental contact details may be shared with other agencies e.g. H.S.E., who require it: **YES : NO**
- Use of a nominated mobile number by the school for Text-a Parent and emergencies. Please nominate one mobile number:

\_\_\_\_\_

- Please nominate one e-mail address:

\_\_\_\_\_

- We have received and read a copy of the "Code of Behaviour" and agree our child will abide by same:  
**YES : NO**
- We will co-operate with the staff and support the ethos of the school: **YES : NO**

**Signature Parent/Guardian 1:**

**Signature Parent/Guardian 2:**

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**NB: Please ensure that a photocopy of the child's BIRTH CERTIFICATE is returned along with the Registration Form**