

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

St Vincent’s Infant Boys’ School

Enrolment form

Class Level being applied for: Junior Infants Senior Infants 1st Class

## Child’s Details

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PPSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Languages Spoken at home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Pre school / Previous school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** **Parent / Guardian Information**

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of origin: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country of origin: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Other Information**

Names of other children in the school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact who can be contacted and are available in the absence of parent(s):

Admission Policy: Where misleading / Untrue information is given, the application is considered null and void and BoM reserves all rights including withdrawal of any offer of a school place.

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| Name | Phone Number | Address |
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| **NEIC CITY CONNECTS PILOT PROJECT**  **REQUEST FOR INITIAL INVOLVEMENT FORM** | | | | |
| **What is the NEIC City Connects pilot project?** | | | | |
| In our work to support your child we see the importance of learning about your child in their school environment.  This includes identifying their strengths, the things they find challenging and the barriers to their learning. In order to help us do this essential work we are starting a pilot project called City Connects. The NEIC City Connects pilot project will be used by the teachers at our school. It will help us to better understand and support all the areas where your child is doing well and also the areas where they may need more support.  **The City Connects Coordinator**  A City Connects Coordinator collaborates with school staff to review the strengths and needs of every student in your school. With your support, the City Connects Coordinator then links each child to a tailored set of services. These services in the school or community will address your child’s particular strengths and needs. The activities can include sports, arts and music, after-school programs, tutoring, and mentoring. The personalised set of activities and services is designed to help each child to reach his or her full potential.  Students benefit from the connections made by their City Connects Coordinator.  **What will happen in the NEIC City Connects pilot project?**  1. With your agreement, your child’s class teacher will work with the City Connects Coordinator. Together they will review every child to learn about their strengths and areas in need of support. They will review under four main areas: academic, social/emotional/behavioural, health/medical and family.  2. All details on the strengths and needs of your child will be used to develop an individualised City Connects Student Profile and Plan to help them. The City Connects Coordinator will make recommendations for activities both in school and outside of school that will help your child. These recommendations are designed to develop their strengths and support them in any areas where they are having some difficulty.  3. A summary of your child’s areas of strengths and needs will be provided to you on request. If additional supports are recommended, you will be consulted about these. You will need to give permission for your child to attend any additional services.  4. The City Connects Coordinator will also help with access to support services. They will keep track of progress made by checking back with the school, child and family. This is to ensure that we are helping to make things better for your child.  **How is the information gathered at school used and stored?**  The information in your child’s City Connects Student Profile and Plan will be used to plan how to best support your child. It can be accessed by the City Connects Coordinator and teachers in the school. If there are other supports or interventions that we feel would help your child, we will contact you directly to arrange these.  The City Connects Coordinator will use your child’s information to:   * Work with your child’s teachers, school staff and principal to develop a tailored City Connects Student Profile and Plan. This plan will build on your child’s strengths and needs. * Recommend enrichment activities, resources and services. These will be discussed and approved by you prior to delivery of any services. * Improve the implementation of the City Connects Project. To do this, anonymised (non- identifiable) information about work with students by will be shared with our collaboration partners. These partners are Tusla Education Support Service, Mary Immaculate College and Boston College. * Improve collaboration between support staff and services in your child’s school and community.   Your privacy is important to us and further information on why and how your child’s personal data is processed and your data protection rights is available in the school’s data protection policy which is available on our school website. | | | | |
| **Initial Involvement form for your child to participate in the NEIC City Connects Pilot Project** | | | | |
| **Name of National School** | | | **St. Vincent’s Infant Boys’ School** | |
| **Student details (A separate form should be completed in respect of each individual child)** | | | | |
| **Child’s Name** | | |  | |
| **Date of Birth: (DD/MM/YY)** | | |  | |
| **Child’s Personal Public Service Number Ireland (PPSN)** | | |  | |
| **Home Address: (where the child lives)** | | |  | |
| **Eircode:** | | |  | |
| **What class is your child in?** | | |  | |
| **Who is your child’s class teacher?** | | |  | |
| **Parent/Guardian Details** | | | | |
| **Parent(s)/Guardian(s)**  **Names** | **Parent/Guardian 1** | | **Parent/Guardian 2** | |
|  | |  | |
| **Relationship to child** |  | |  | |
| **Legal Guardian**  **(please tick ✓)** | **Yes** |  | **Yes** |  |
| **No** |  | **No** |  |
| **Telephone Number:** |  | |  | |
| **Address (if different to above)** |  | |  | |

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| **Participation in the NEIC City Connects Pilot Project**  **Please read the statements below carefully and sign and date at the bottom of the form. If you have any questions, please make contact with the school.** |
| * I/we request my/our child to participate in the NEIC City Connects pilot project in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School. * I/we understand that my/our child’s class teacher will work with other school staff and the City Connects Coordinator to plan and track supports to help my child’s development. * I/we understand the information gathered on my/our child will be processed in line NEIC City Connects Pilot Project Data Protection Notice (attached). * I/we understand that if there are any concerns about the safety and welfare of a child, the school will follow Children First national guidance and legislation to protect the child. * I/we understand that we can withdraw my/our child from participation in the NEIC City Connects pilot project at any time by advising the school in writing. * I/We understand that if we do not agree to my/our child’s participation in the NEIC City Connects Pilot project my/our child will still continue to receive his or her current supports. The NEIC City Connects team will be unable to access their data to provide the individualised supports being provided through the pilot project. * I/we provide my/our agreement for my/our child to participate in the pilot project  |  |  |  |  | | --- | --- | --- | --- | | Parent/Guardian: |  | Date |  | | Parent/Guardian: |  | Date |  | | **Data Protection Notice** | | | | | Information collected in school to support your child through the NEIC City Connects Pilot Project will enable *St. Vincent’s Infant Boys’ School* to best support your child’s individual strengths and meet any additional needs they may have. This information will be maintained securely in electronic format and will be processed strictly in line with the NEIC City Connects Project Data Protection Notice (attached) and the school’s Data Protection Policy. | | | | |