



# Powerstown Educate Together National School

Roll number 20384J  
 Powerstown Road, Tyrrelstown, Dublin 15.  
 D15VR80  
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[www.powerstownet.com](http://www.powerstownet.com)

## Powerstown ETNS Student Application Form: MAINSTREAM ONLY

### Personal Information

Child's First Name:											Child's Surname:										
Child's Birth Cert Name:																					
Child's PPS Number											Mother's Maiden Name:										
DOB:											Sex:	<input type="checkbox"/> Male					<input type="checkbox"/> Female				
Home address:																					
Eircode (*Required)																					
Name of Parent/Guardian1:																					
Contact Number:											(Default receiver of text msg)										
Email address: (Default receiver of emails)																					
Name of Parent/Guardian 2																					
Contact Number:																					
Email address:																					
Religion (if any)?											Nationality?										
To which ethnic or cultural background group does your child belong? (Please tick one)																					
<input type="checkbox"/> White Irish <input type="checkbox"/> Irish Traveller <input type="checkbox"/> Roma <input type="checkbox"/> Any other white background <input type="checkbox"/> Black or Black Irish - African <input type="checkbox"/> Black or Black Irish - Any other Black background <input type="checkbox"/> Asian or Asian Irish - Chinese <input type="checkbox"/> Asian or Asian Irish - Any other Asian background <input type="checkbox"/> Other including mixed race backgrounds																					
Mother tongue:											Language spoken at home:										
Child resides with?											Custody issues that school should be aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No										

## Health / Medical Information

Family Doctor:		Practice Name:	
Address:		Phone Number:	

## ECCE – Pre-school / Previous School Details

Name of preschool / previous school:			
Address of preschool / previous school:			
Email address of preschool / previous school:			
Phone no of school/preschool:		Principal/Manager name:	
Enrolment date in last school: (start date)		Leaving date in last school: (last date)	
<b>Current class:</b>			
Note: Where a parent/guardian wishes to transfer their child/children from another primary school, the Principal Teacher will make contact with this school prior to the child being enrolled in Powerstown ETNS			

## Transfer of Information Form (if child accepts place in the school)

Having enrolled my/our child in Powerstown Educate Together National School, roll number 20384J, I/we hereby give my/our consent that any reports, assessments, referrals, test results, HSE reports and any other relevant information or reports be made available to Powerstown Educate Together National School	
<b>Child's Name:</b>	<b>PPS Number:</b>
<b>Date of Birth</b>	<b>Address:</b>
<b>Previous school name/HSE body &amp; contact information:</b>	
<b>Parent/Guardian Name:</b>	<b>Signature</b>
<b>Parent/Guardian Name:</b>	<b>Signature</b>

## Parental Consent Form

	Tick here to indicate consent
I give permission for my child to be photographed during school activities.	
I give permission for my child to be exposed to the internet & use the internet for educational purposes during school hours on the school premises	
I give permission for my child to be involved in local outings – outings that do not involve the use of transport such as nature trails, maths trails in the locality.	
I give permission for photographs and videos of my child to be used by the school. Photographs may be displayed in the school, used on the school website or facebook page, and may be published by newspapers, broadcasters & by Educate Together	
I give permission for my child to be represented using digital media e.g. official school recording of school play.	
<b>Child's name:</b>	
<b>Parent/ guardian signature:</b>	

## School Policies and Code of Behaviour

	Please tick
By enrolling my child in PETNS, my child and I agree to adhere to the School's Code of Behaviour which is accessible online <a href="https://www.powerstownet.com/petnspolicies/">https://www.powerstownet.com/petnspolicies/</a>	
By enrolling my child in PETNS I am aware that my child will be supported by COS team in line with the school's Continuum of Support Policy.	
By enrolling my child in PETNS, my child and I agree to adhere to all school policies and procedures <a href="https://www.powerstownet.com/petnspolicies/">https://www.powerstownet.com/petnspolicies/</a>	
<b>Parent / Guardian signature:</b>	

## Emergency Contact Information:

In case, for some reason, we are unable to get in touch with you, we require emergency contact numbers of at least two other individuals:		
<b>Emergency contact name</b>	<b>Emergency contact number:</b>	<b>Relationship to child</b>

## School Testing:

Throughout the school year class teachers and our support team carry out numerous assessments on children to record their progress and evaluate teaching practices. This is an important part of our school plan and enables us to enable all pupils to reach their potential. Some tests are carried out within the classroom and others are completed in small groups or individually. Tests are administered by class teachers and COS teachers.

- **Standardised classroom testing includes (but is not limited to):** CAT4, PSAK, BIAP, MIST, Drumcondra Early Numeracy, Drumcondra Early Literacy, Drumcondra Reading, Drumcondra Spelling, Drumcondra Gaeilge, Sigma T. Micra T, Drumcondra Maths
- **Screening testing includes (but is not limited to):** Dyslexia Screener Test, ACE, Bracken, Lucid Cops, NRIT, NVRT, WRAT

I hereby give permission for my child to be tested by class teachers and/or support teachers in accordance to the school's Teacher Assessment Strategies Policy.

Signed: \_\_\_\_\_ **(Parent's signature)**

### SCHOOL USE ONLY

ITEM	YES	NO	COMMENT
Date from returned:			
Utility Bill/Bank Statement:			
Birth cert:			
Consent form:			
Permission to contact others:			
Details of previous school/pre-schools:			
4 years old on/before 1st of June:			
Sibling:			
Offer of place: YES / NO	Date if YES:		
Waiting List: YES / NO	Date if YES:		
Place Accepted: YES / NO	Date of response:		
If place declined at a further date please detail:			