



# Presentation Secondary School Listowel Co .Kerry

## Enrolment Form 2021-2022

*“Applicants should read the school’s Admission Policy, which is available on [www.presentationsecondarylistowel.ie](http://www.presentationsecondarylistowel.ie) prior to completing the application form.*

*The information requested on the application form is required in order to process your application for admission to the school. The information provided by you will be treated confidentially and processed in line with the school’s Admission Policy.*

*Any personal data provided on this form will be used to (i) identify applicants (ii) process an application in line with the school’s admissions policy (iii) communicate with parents/guardians in respect of an application (iv) notify parents/guardians of the outcome of an application.*

*The information will be retained for an appropriate period thereafter to address any potential queries arising from the application process or added to the student’s school file in the case of successful applicants.*

*In accordance with section 66(6) of the Education Act 1998, as amended, personal data relating to applications for admission may be shared with the board of management of another school or the patron in order to facilitate the efficient admission of students. This information may include the date on which an application was received by the school, the date on which an offer was made and the date on which an offer was accepted. Personal information concerning applicants may also be shared, including their name, address, date of birth and PPS number.*

*Further information on the handling of your personal data, including how to exercise your rights under GDPR, is set out in the school’s Data Protection Policy, which is available on [www.presentationsecondarylistowel.ie](http://www.presentationsecondarylistowel.ie)*

**PRESENTATION SECONDARY SCHOOL LISTOWEL CO KERRY**

**ENROLMENT FORM 2021– 2022**

*The following information is required to aid in the performance of the functions conferred under enactment of secondary legislation by the Department of Education and Skills.*

(Please Use Block Letters When Completing The Form)

<b>Name/Surname</b> <i>(as on Birth Cert.)</i>		
<b>Known As</b>		
<b>Address</b>		
<b>Eircode</b>		
<b>Date of Birth</b>		
<b>Country of Birth</b>		
<b>Nationality</b>		
<b>Student's PPS Number<sup>1</sup></b>		
<b>Primary School last attended</b>		
<b>No. of children in the family</b>		
<b>Place of child in the family</b>		
<b>Please list other members of the family attending this school</b>	<b>Name &amp; Class</b>	
	<b>Name &amp; Class</b>	
	<b>Name &amp; Class</b>	
	<b>Mother/Guardian</b>	<b>Father/Guardian</b>
<b>Name</b>		
<b>Mother's Maiden Name</b>		
<b>Home Phone Number</b>		
<b>Mobile Number</b>		

<sup>1</sup> Not obligatory personal data until student is offered a place in a Secondary School.

## **Communication from Presentation Secondary School, Listowel**

Presentation Secondary School, Listowel is a data controller under the Data Protection Acts, 1988/2003/2018 & the General Data Protection Regulations (GDPR). The personal data supplied on this Enrolment Application Form is required for the purposes of: student enrolment, examinations, student registration, school administration, child welfare (including medical welfare), determining students' eligibility for additional learning supports & transportation, allocation of teachers & resources to the school, to fulfil our other legal obligations and to facilitate communication with parents/guardians

### **Tick the box to provide your consent**

I hereby consent to my personal data being processed by Presentation Secondary School, Listowel for the purpose of communication / contact by SMS text messaging/email/post/phone using the personal data provided on this form, for the purposes of notifying me of the following: school events and activities, parent teacher meetings, school concerts/events, administration issues and school closures (e.g. where there are adverse weather conditions), my daughter's non-attendance/punctuality or any other issues relating to my daughter's progress and/or conduct in school, as well as to communicate with you in relation to your daughter's social, emotional and educational progress, newsletters, events or activities organised by the school or run by other bodies, which may be of benefit to your daughter's educational progress, health and/or wellbeing, as well as contact in the case of an emergency.

Signed \_\_\_\_\_ 1<sup>st</sup> Parent/Guardian    Date: \_\_\_\_\_

Signed \_\_\_\_\_ 2<sup>nd</sup> Parent/Guardian    Date: \_\_\_\_\_

## **Consent for the Processing of Personal Data**

### **Tick the box to provide your consent**

I hereby consent to the processing of both mine and my daughter's personal data by Presentation Secondary School, Listowel. I understand that the purpose of processing the personal and special category data is to aid my daughter's transition into post-primary school and for the performance of the functions conferred under enactment of secondary legislation by the Department of Education and Skills and administration purposes.

Signed \_\_\_\_\_ (Mother/Guardian)    Date: \_\_\_\_\_

Signed \_\_\_\_\_ (Father/Guardian)    Date: \_\_\_\_\_

## **Emergency Contact Person's Details**

**Name & Telephone Number(s) of the person to be contacted in an emergency in the event of neither Parent/Guardian being available:**

**Name:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**Tick to indicate your consent to the processing of your personal data**

I hereby consent to the processing of my personal data in relation to being listed as an Emergency Contact Person and for the purpose of being contacted via phone or SMS as appropriate.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Emergency Contact Person)

Where Parent(s)/Guardian(s) reside at different addresses, please confirm who has full responsibility and to whom correspondence is to be sent and the address if different from above

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

Would like to be in the same Class as: \_\_\_\_\_ (No more than 1 Name)

### **Sharing of Personal and Special Category Data with the Department of Education and Skills**

Certain sensitive personal data which the Department asks post-primary schools to furnish via the “Annual Post-Primary School October Returns/ Examination Entries” process requires your consent for your child’s school to record this information and for the school to share this information with the Department of Education and Skills for purposes as outlines in circular 0047/2010, a copy which is available at [www.education.ie](http://www.education.ie) or on request from the school.

This information is useful in aiding in the development of policy to promote social inclusion and for the provision of additional teaching hours for children who are members of the Traveller Community.

You are not obliged to provide this information.

This information includes details of the student’s possession of a medical card, if a member of the travelling community, nationality, gender, whether English is their mother-tongue, and ethnic or cultural background.

See <https://www.education.ie/en/The-Department/Data-Protection/departement-of-education-and-skills-privacy-notice.pdf> for privacy notice of the Department of education and Skills.

**Tick the box to provide your consent.**

I hereby consent to the processing of my daughter’s personal data by Presentation Secondary School Listowel and the sharing of her **personal data** with Department of Education & Skills via the “Annual Post-Primary School October Return/Examination Entries” etc.

I hereby consent to the processing of my daughter’s personal data by Presentation Secondary School Listowel and the sharing of her **special category data** with Department of Education & Skills via the “Annual Post-Primary School October Return/Examination Entries” etc.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian/Student

## Cooperation with Staff of Presentation Secondary School, Listowel.

\* I am willing to co-operate with the Staff in everything that is for my daughter's advantage.

Signed: \_\_\_\_\_ (Mother)  
\_\_\_\_\_  
(Father)  
\_\_\_\_\_  
(Guardian)

Student's Signature: \_\_\_\_\_

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

## Details of Additional Learning Support provided in Primary Schools

PLEASE COMPLETE

<b>Name of Pupil</b>		
<b>Primary School</b>		
<b>Is your daughter receiving Special help with any subject in Primary School?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>If so, please give details</b>	<b>Subject:</b>	<b>Teacher:</b>
	<b>Subject:</b>	<b>Teacher:</b>
	<b>Subject:</b>	<b>Teacher:</b>
	<b>Subject:</b>	<b>Teacher:</b>

## ASSESSMENTS

PLEASE COMPLETE

Has your daughter had any of the following: -

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| An Educational Assessment (carried out by Psychologist)  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| A Psychological Assessment (carried out by Psychologist) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| A Medical Assessment                                     | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Any other relevant Assessment                            | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

These Assessments may be essential for the School to secure extra help for your daughter. If your daughter has an Assessment and her Primary School has a copy of it they may release it to us but only with your permission. Please sign below if you are willing to release it.

- |                             |   |                          |
|-----------------------------|---|--------------------------|
| <b>Medical Card Details</b> | <b>Has her own Medical Card</b>               | <input type="checkbox"/> |
|                             | <b>Is on the Family Medical Card</b>          | <input type="checkbox"/> |
|                             | <b>Does not have access to a Medical Card</b> | <input type="checkbox"/> |

# HEALTH FORM

(Please complete in full)

<b>Name</b>	
<b>Doctor</b>	
<b>Doctor's Phone No.</b>	
<b>Address</b>	
<b>Medical Card No.</b>	
<b>Nature of Illness</b>	
<b>When Diagnosed</b>	
<b>Symptoms</b>	
<b>Areas of Risk</b> <i>(Please define clearly)</i>	
<b>Any known triggers</b>	
<b>Prognosis</b>	

**EXEMPTION FROM IRISH**

PLEASE COMPLETE

Name of Parent: \_\_\_\_\_

Name of Pupil: \_\_\_\_\_

If you have an exemption from Irish, please tick here

**OTHER CONCERNS**

I have the following concerns about my daughter commencing Secondary School

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I would like to meet the Principal privately to discuss areas of concern

Yes

No

I may be contacted at: \_\_\_\_\_



## Processing Special Category Data

**Consent Required: (Please tick as appropriate)**

I hereby consent to the processing of my daughter's **special category data** by Presentation Secondary School, Listowel.

**Signature:** \_\_\_\_\_  
(Parent/Legal Guardian's)

**Date:** \_\_\_\_\_

## Primary School's Reports / Assessments

**Consent Required:**

**Tick the box to provide your consent.**

I consent to Presentation Secondary School, Listowel contacting my daughter's primary school and for my daughter's primary school to share her **personal data** including copies of teachers' records, class notes, academic records, etc. with the Principal of Presentation Secondary School, Listowel.

I consent to Presentation Secondary School, Listowel contacting my child's primary school and for my child's primary school to share her **special category of personal data** including copies of teachers' records, class notes, academic records, copies of psychological reports / assessments and other records relevant to my child's welfare etc. with the Principal of Presentation Secondary School, Listowel.

I wish to request my daughter's primary school to transmit directly to Principal of Presentation Secondary School, Listowel my daughter's records of personal and special category of data such as teachers' records, class notes, academic records, copies of psychological reports / assessments and other records relevant to my child's welfare (**Data Subject's Portability Request**).

I understand that the purpose of processing this personal and special category data is to aid my daughter's transition into post-primary school and for the performance of the functions conferred under enactment of secondary legalisation by the Department of Education and Skills.

**Signed** \_\_\_\_\_  
(Mother / Father / Guardian)

**Date:** \_\_\_\_\_

## **Permission for School Photographs, School Website and Media Promotions**

### **Consent required (Tick as applicable)**

I hereby consent for my daughter's photograph/digital image being processed by Presentation Secondary School, Listowel ranging from the archiving of records to press coverage of achievements, including the photographs/digital images of my daughter during her career in the school in relation to

- + Individual/group photographs/video in classrooms/learning environments for display/use in school and/or for developing of learning and teaching.
- + General photographs/video of children working in classrooms or around the school for our archives
- + Photographs/video of school events (e.g. educational activities/visits, sports, drama and music performances etc) for our prospectus, newsletter and other school publications
- + Photographs/video of achievements/events for the school website and social media.
- + Press photos of awards ceremonies, individual achievers, school activities/events, etc.
- + All photographs and images will be taken and used with the students' best interests as a priority. Staff will exercise professional judgement regarding the suitability of images and their use. You may withdraw your consent at any time by writing to the Principal.

I am the parent(s)/guardian(s) of the above-named student and have the legal authority to execute the above release. I fully understand its contents

Parents Signature :- \_\_\_\_\_ Date :- \_\_\_\_\_

### **Accuracy of Personal Data**

The GDPR and the Data Protection Acts require that personal data is accurate, and, kept up to date, we rely on parents/guardians and students to provide us with accurate, and complete information and to update us in relation to any change in the personal data provided. Should you wish to update your/your child's personal data, please write to the school principal detailing the change in the personal data previously provided.

**CLOSING DATE FOR RETURN OF ENROLMENT FORM: FRIDAY, 27<sup>TH</sup> NOVEMBER, 2020**