



**PORTLAOISE COLLEGE**  
**1<sup>ST</sup> YEAR STUDENT ENROLMENT FORM 2019/2020**

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

Male

Female

Date of Birth:

PPS No:

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

Email address to receive information from the school: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Mother's Phone Number: \_\_\_\_\_ Father's Phone Number: \_\_\_\_\_

Please indicate name and address of person(s) to whom correspondence is to be sent regarding educational progress of the student, if different from above:

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

Religion: \_\_\_\_\_

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

Number to be used for school's text message service: \_\_\_\_\_

Other Name and Contact Number in emergency: \_\_\_\_\_

If there are any other arrangements in place governing access to or custody of the child, please provide details:

\_\_\_\_\_  
Current Primary School: \_\_\_\_\_

Sisters/Brothers in Portlaoise College: \_\_\_\_\_

Tick and/or elaborate if the student has any of the following:

Medical Needs:  \_\_\_\_\_

Special Education Needs:  \_\_\_\_\_

Psychological Assessment:  \_\_\_\_\_  
(Please attach copy)

Subject Exemption:  \_\_\_\_\_  
(Please attach copy)

## Check List for 1<sup>st</sup> Year Enrolment 2019/2020

- |   |               |
|---|---------------|
| <b>1. Birth Certificate (Photocopy)</b>   | <b>Yes/No</b> |
| <b>2. Registration Fee of €50 – Lockers, Insurance, Journal<br/>(Non-refundable other than if the school is not in a position to offer<br/>student a place)</b> | <b>Yes/No</b> |
| <b>3. Relevant Psychological Assessment (if applicable)</b>   | <b>Yes/No</b> |
| <b>4. 1 Passport Photograph</b>   | <b>Yes/No</b> |
| <b>5. PPS Number</b>  | <b>Yes/No</b> |
| <b>6. Email Address:</b>  | <b>Yes/No</b> |
| <b>7. Mobile Phone number for text messaging service</b>  | <b>Yes/No</b> |

**Note:**

The final date for enrolment is **Friday 26<sup>th</sup> October 2018.**

Applications received after this date will be treated as late applications and are by appointment only.

**Parent/Guardian (Contract and Consent)**

In registering my above named child as a student in Portlaoise College, I understand that this implies a full acceptance of the rules of the school as laid down from time to time by the Board of Management. I will provide copies of recent psychological or other professional educational assessments to the school. I understand that, while every effort will be made to ensure that my son/daughter will be facilitated in his/her subject choices, this may not always be possible.

As a partner in the education of my child, I recognise the need for me to do my utmost to support the work of the school.

**Data Protection:**

Laois/Offaly ETB is registered as a Data Controller. The personal data supplied on this application form is required for the purposes of student enrolment, registration, administration, child welfare and to fulfil our other legal obligations. Contact details will also be used to notify you of school/ETB events or activities. While the information provided will generally be treated as confidential to Laois/Offaly ETB, from time to time it may be necessary for us to exchange personal data on a confidential basis, where we are legally required to do so, with other bodies.

By signing this application, I am giving full, explicit and informed consent for Portlaoise College:

- to confirm, retain, use and disclose the information I have provided in accordance with our Data Protection Policy.
- to contact my child's previous school to access records, assessments etc., as required.
- for my child's photograph to be used in school publications both written and online.

**Note:**

Please note that all applications are subject to our Admissions Policy which is available on our website at [www.portlaoisecollege.ie](http://www.portlaoisecollege.ie) or from the school office.

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Signature of Mother/Guardian

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Signature of Father/Guardian