



St Michael's School

Roselawn Drive,
Castlerea,
Co. Roscommon F45 TR63.
Roll No: 19789F

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www.stmcr.ie

CONFIDENTIAL
SCHOOL ENROLMENT

The School needs a Psychological Assessment and Birth Certificate for Enrolment.

Pupil's Name:

Address: Eircode:

PPS No:	Nationality:
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Date of Birth:	Date of Enrolment:
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Home Tel No: Emergency Contact Name & Tel No: Contact Email Address:
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Religion (optional):	Sacraments received (if any):
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Father's Name:	Occupation:
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Mother's Name:	Maiden Name:
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Guardian(s):

Previous school(s)/Centre(s):

Doctor's Name: Doctor's Tel No:	Pupil's Medical Card No:
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Is your child on Medication? Is there anything we should know about their health?

Is there any other information regarding your child that you might like us to be aware of (including dietary needs)?
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Parents/Guardians can access the St. Michael's Code of Behaviour and other Policies by appointment at the School.

I consent for information about my child to be stored and shared in accordance with data protection guidelines of the Department of Education and Skills and with St. Michael's school policy.

Signed..... Date