

**SCHOOL NAME: ST MARY'S NATIONAL SCHOOL  
ADDRESS: VIRGINIA, CO. CAVAN**

<b>Roll Number: 16083T</b>		<b>Phone Num: 049-8547035</b>	<b>Email: info@virginians.ie</b>
PUPIL INFORMATION			
<b>First Name:</b>		<b>Surname:</b>	
<b>Class 2019/20</b>		<b>Birth Cert Name:</b>	
<b>Date of birth:</b>	<b>PPSN:</b>	<b>Gender:</b>	
<b>Religion:</b>	<b>Parish:</b>	<b>Name of siblings attending N.S.</b>	
<b>Baptised: (Yes / No) Date:</b>	<b>Location Baptised:</b>		
<b>County:</b>	<b>Nationality:</b>		
Ethnic or Cultural Background: <b>Select from one of the following:</b> <i>White Irish / Irish Traveller / Roma / Any other White Background / Black or Black Irish – African / Black or Black Irish – Any other Black Background / Asian or Asian Irish – Chinese / Asian or Asian Irish – Any other Asian Background / Other (Incl. Mixed Background) / No Consent</i>			
FAMILY DETAILS			
<b>Fathers First Name:</b>		<b>Fathers Surname:</b>	
Fathers Address:			
Mobile Phone:	Work Phone:	Home Phone:	
Email:	Occupation:	PPSN:	
Nationality:	Religion:	Comments	
<b>Mothers First Name:</b>		<b>Mothers Surname:</b>	
Mothers Address:			
Mobile Phone:	Work Phone:	Home Phone:	
Email:	Occupation:	PPSN:	
Nationality:	Religion:	Comments	
<b>Other Contact First Name:</b>		<b>Contact Surname:</b>	
Contact Address:			
Mobile Phone:	Work Phone:	Home Phone:	
MEDICAL INFORMATION			
Doctor Name:		Doctor Phone	
Medical History / Conditions / Allergies:			
PREVIOUS EDUCATION			
School: Address:			
AUTHORISATIONS			
Do you give permission for your son/daughter to undertake standardized tests?		Yes	No
Do you give permission to take your child to hospital in case of serious illness or accident?		Yes	No
Does any legal order under family law exist that the school should know about?		Yes	No
Do you give permission for your child's photograph/DVD to be taken during school activities		Yes	No
Do you give permission for your child's photograph to be taken and/or used on our website/class blog		Yes	No
Do you give permission for your child to go on school related outings/walks down town with their teacher		Yes	No
Do you give permission for your child to follow the school's acceptable use policy on the use of the internet for educational purposes		Yes	No
SIGNATURES			
Signature of Parent / Guardian:		Date:	
Signature of 2 <sup>nd</sup> Parent Guardian:		Date:	

**Please attach a copy of your son/daughter's Birth Certificate  
\*\*St. Mary's National School is a nut free school**