

*Junior
Infants
2020*

Personal Details

Child's Name: _____ Date of Birth: _____

Nationality: _____ First Language: _____

If your child was born outside Ireland, what country was she born in? _____

When did she come to Ireland? _____ --

Brother/Sister in St Canice's Schools: Yes No

If yes, please name and state class level: _____

<u>Mother's Details</u>	<u>Father's Details</u>
Name:	Name:
Address:	
Eircode	Eircode:
Email:	Email:
Phone:	Phone:

Mum / Dad past pupils of St. Canice's Schools Yes No

Playschool / Pre-School Details

Has your daughter attended Playschool or Pre-School? Yes No

Name: _____

Address: _____ Phone: _____

If you have been informed of any concerns regarding your daughter, or have had recommendations made regarding her further education, please give details below.

For Office Use Only

Date and Time Received:	Received by:	Birth Cert Attached	
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Medical Details & Special Needs

Does your child have any medical conditions? Yes No

If yes please give details: _____

Has your child been assessed for behavioural / learning / speech problems?

Yes No

If yes, please give details and supply necessary reports:

Does your child have any diagnosed Special Needs? Yes No

If yes please give brief details. _____

Additional Details

Do you have any concerns about your child that may affect her in her school life?

Is there any history of learning difficulties in the family? Yes No

If yes, please give details: _____

Do you agree to abide by the terms of our Code of Behaviour and School Policies? Yes No

Signed: _____ + Date: _____

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