

CAHERLINE NATIONAL SCHOOL

'Judge each day not by the harvest, but by the seeds you plant'

ASD UNIT - APPLICATION FOR ENROLMENT

Please tick: Year 2022/23	Year 2023/24 ☐ Year 2024/25 ☐				
Name of Child:	Date of Birth				
Nationality (one only):	PPS No:				
Gender: Male □ Female □					
Religion: (This is not part of our criteria for enrolment). If no religion please v					
'None', if Christian please state whi	ich denomination, e.g. Catholic, Protestant etc. Caherline NS is a				
Catholic school and as such it has a	Catholic ethos. Non-Catholics should be aware that, for supervision				
reasons, your child will attend Cathe	olic Masses and Ceremonies during the year.				
Child's Address:					
Eircode:					
	will be sent to child's address above, unless otherwise informed. Please				
•	parents/guardians to receive notification regarding Parent/Teacher				
meetings, reports etc.					
Mothers Name:					
Tel No: Mobile:	Home:				
Email:					
Address and Eircode:					
Fathers Name:					
Tel No: Mobile:	Home:				
Email:					
Address and Eircode:					

Mobile number on whi	ch you would like to receive text messages:			
No. of children in fami	ly:			
Position in family (e.g.	. 1 st child etc.)			
Names of brothers/sist	ers in school:			
Preschool attended:				
Tel No:				
*If transferring from a	nother school, please fill in the following section:			
Other primary schools	attended (if appropriate);			
Current Class:				
Is your child exempt fr	om Irish, if so please state reason:			
Please include a cop	y of last school report if moving from another school.			
I give permission to the	e Principal of Caherline NS to discuss the needs of my son/daughter with the			
Principal/Manager of the schools listed above: Yes/No (please circle)				
Name of family doctor	:			
Tel No:				
Has your child ever att	ended: (a) Speech Therapist (b) Occupational Therapist			
(c) Psychologist	(d) Counselling (e) Other (give details)			
If YES, a copy of repo	orts should accompany this form			
• Does your child	d have any known allergies?			
If yes, please give deta	ils:			
Does your child	d have any physical, sensory or emotional problems which might affect his/her ability			
to learn and/or	to interact with staff and students?			
If yes, please specify:				
Any other useful	ul information, for instance list any problems child has in relation to health, toilet			
training, button	s, laces etc.			
Name of person who n	nay be contacted if child is ill, if both parents are not available:			
	e.g. grandparent, minder etc.)			
In the case of minor ac	cidents, such as slight cuts and grazes, the cut is normally washed with water and then			

treated with a mild disinfectant spray. A plaster is then applied. If you do not want this administered, please

collect	the child to bring him/her for treatment.				
Do you	Do you give permission to take child straight to hospital in case of serious illness or accident:				
Do you	give permission to pass on your child's details to the HSE, if required;				
Do you	give permission for your child to take part in the 'Stay Safe' Programme (<u>www.staysafe.ie</u>):				
Does a	ny legal order under Family Law exist that the school should know about, if yes give brief outline				
The sch	nool should also be made aware of any court order which affects the child's welfare and also the				
name o	f any person into whose custody the child should NOT be given:				
The fol	lowing Caherline National School Policies are available on the school website (<u>www.caherlinens.ie</u>),				
please 1	read them carefully:				
•	Code of Behaviour				
•	Child Protection Policy				
•	ASD Enrolment Policy(please read this policy carefully to understand the application process)				
•	Acceptable Use Policy (internet)				
If you o	do not have access to the internet, please inform the school and we will provide hard copies.				
I confir	m that I have read the above policies and I agree that the pupil enrolled will be subject to those codes				
and pol	icies:				
Signed	Parent/Guardian.				
•	Do you give permission for your child to go on school trips under supervision during the school day				
	(e.g. school tours, swimming, local historic/nature walks)?				
•	Our school would like to celebrate and share your child's work and achievements. With this in mind				
	Caherline National School would like to take and use photographs and/or digital images of your				
	child for use in printed publications or materials, electronic publications, school website, social				
	media, Church and classroom displays for the duration of his/her time in the school. However, if you				
	do not wish your child to be photographed please write to the Principal.				
•	Sometimes the school is requested to pass on names of children and their addresses to the HSE for				
	immunization/dental purposes, to secondary schools when children are transferring to second level,				
	to sporting bodies when children are taking part in games outside school. Do you allow the school to				
	pass on this information to these bodies:				

inform the school in writing. If the accident is serious parents are informed immediately and are asked to

If your application is successful, you will be contacted in due course regarding an Open Day for children and parents, at which you will be issued with an Information Booklet with all relevant information regarding school rules and procedures, books, uniform etc.

The application form must be accompanied by all of the following documentation supplied by parents:

- The child must have a diagnosis of Autistic Spectrum Disorder made using the DSM-IV/V or ICD 10 by a professionally recognised clinical psychologist.
- Original birth certificate.
- Proof of address (Utility bills)
- A written psychological assessment/report (dated within 6months prior to the Application being submitted) from a multi-disciplinary team must be provided. A multi-disciplinary team such as Children's Disability Network team (CDNT) should include reports from a Clinical Psychologist, Occupational Therapist, Speech & Language Therapist, Social Worker and a Physiotherapist. There must be a full cognitive assessment and an assessment of the child's adaptive functioning as part of this assessment.
- Please note all reports in operation on a child should be provided to the school for assessment by the Admissions Team.
- There must be a recommendation by the relevant professionals in the report that a special class placement in a mainstream school is both necessary and suitable for the child.
- The child has access to, and will continue to have access to, specified services as recommended; for example, Occupational Therapy, Speech Therapy, Psychology.
- In accordance with the General Data Protection Regulation, parents/guardians are required to provide written consent that the Admissions Team can contact outside disability and support services that their children are attending.

NB: If the school does not receive this documentation with the application form, the application cannot be processed or considered by the school. It is the responsibility of the parent(s)/guardian(s) to ensure that all supporting documentation is correct and is received by the school.

I certify that the information I have given in this form is correct.

Signed:	Mother:	Date:
	Father:	Date:
	Please return to: Caherline National Sch	ool, Caherline, Caherconlish, Co. Limerick.

Please attach: - Birth Certificate and any relevant reports/assessments

<u>Please Note</u>: Completion of this application form does not guarantee a place in the school. Acceptance is at the discretion of the Board of Management. Thank you.