



# TULLOW COMMUNITY SCHOOL

The Mullawn,  
Tullow,

Co. Carlow

T: 059 9151473

F: 059 9151472

E: [info@tullowcs.ie](mailto:info@tullowcs.ie)

W: [tullowcommunityschool.ie](http://tullowcommunityschool.ie)

Dear Parent(s)/Guardian(s),

**Due to Covid-19 restrictions we are unable to hold our usual Open Evening or Enrolment evening.**

Applications for enrolment for the academic year 2021 –2022 will commence from 1<sup>st</sup> October 2020.  
Applications will be accepted by post or they can be handed into the school office during school hours.

The following will be required for enrolment:

- Enrolment Form
- Copy of Pupils original Birth Certificate
- Pupil's PPSN
- Two Passport Photographs (with name on the back)
- Psychological Assessment (if applicable)
- Irish Exemption (If applicable)

**Please note both a copy of the Psychological Assessment and Irish Exemption must be included with your application in order for your child to be placed in classes for learning support.**

**School Services Fees for 2021-2022 are as follows:**

1<sup>st</sup> Child attending this school- €70.00, 2 Children attending this school (additional €50.00) €120.00

3 Children attending this school (additional €30.00) **Maximum €150 per family.**

School Services Fees (Payable on acceptance) Also includes 24 hr Insurance

Our enrolment for 1<sup>st</sup> year for the academic Year 2021/22 will be capped at 150. Late applications for enrolment received after Friday 23<sup>rd</sup> October will be placed on a waiting list for consideration depending on spaces being available.

All applicants will be informed in writing by Monday, 16th November, 2020 as to whether or not they are being offered a place. Those offered a place must confirm in writing by Friday, 11<sup>th</sup> December 2020 their intention to accept/decline the offer. Failure to respond by this date will result in the offer being withdrawn and the place being allocated to the next applicant on the list (if applicable).

## **Special Class Application and Decision Dates for Admission 2020/21**

The following are the dates applicable for admission to the school's Naomh Brid/Room 60 which caters for children with ASD –

The school will commence accepting applications for admission to the Special class from 1<sup>st</sup> October 2020.

The closing date for applications for admission to the Special class is 11<sup>th</sup> December 2020.

The date by which applicants will be notified of the decision on their application for admission to the Special class is 22<sup>nd</sup> January 2021.

The Schools Admission Policy and Code of Behaviour are available for download on the school website [www.tullowcommunityschool.ie/policies](http://www.tullowcommunityschool.ie/policies).

We welcome your son/daughter to Tullow Community School.

Yours truly,

Paul Thornton,  
Principal.

**Tullow Community School**  
**Enrolment Form - Year 2021/2022**



Surname: \_\_\_\_\_ First Names: \_\_\_\_\_  
(as on Birth Certificate)

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

Pupil's PPS No. \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Religion: \_\_\_\_\_

Country Of Birth: \_\_\_\_\_ Year for which you wish to enrol: \_\_\_\_\_  
(1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> etc)

Home Phone No: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
(if different from above)

Mobile No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Place of work: \_\_\_\_\_ Place of work: \_\_\_\_\_

Work Phone No: \_\_\_\_\_ Work Phone No: \_\_\_\_\_

No. of children in family: \_\_\_\_\_ Place in family: \_\_\_\_\_

Are you the holder of a Medical Card? Yes [ ] No [ ] Medical Card No: \_\_\_\_\_

Brother/Sister now in this school:

Name: \_\_\_\_\_ Class: \_\_\_\_\_

Name: \_\_\_\_\_ Class: \_\_\_\_\_  
(1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>)

School attended last year: \_\_\_\_\_

Principal's name: \_\_\_\_\_

Class completed: \_\_\_\_\_

Examinations taken: \_\_\_\_\_

Examination results: \_\_\_\_\_

PTO/:

**Personal Record:**

1. Family doctor: \_\_\_\_\_ Doctors Phone No. \_\_\_\_\_
2. Contact person in case of emergency:
3. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_
4. Is your child on medication? \_\_\_\_\_
4. Has it ever been suggested by your G. P., Public Health nurse or other relevant person that your child be referred for:
- (a) Extra hearing test: \_\_\_\_\_
- (b) Testing of vision: \_\_\_\_\_
- (c) Speech and language therapy: \_\_\_\_\_
5. Please give details of any medical condition about which we should be aware?  
\_\_\_\_\_

**Special Educational Needs:**

|   | Yes | No  |
|---|-----|-----|
| Did your child attend Learning Support/Resource Classes:                | [ ] | [ ] |
| Does your child have an official Irish Exemption                        | [ ] | [ ] |
| Does your child have an Exemption from a Foreign Language               | [ ] | [ ] |
| (a) Has your child been referred for Psychological/Psychiatric testing: | [ ] | [ ] |
| (b) Counselling:  | [ ] | [ ] |
| (c) Does your child have an SNA   | [ ] | [ ] |
| (d) Does your child have assistive technology                           | [ ] | [ ] |

**If your child has had a professional assessment of any kind, a copy of the report must be produced on enrolment night in order that the necessary resources may be accessed.**

**I give permission for pertinent information from these reports to be communicated to relevant teaching staff and for primary schools to forward any necessary documentation.**

\_\_\_\_\_  
(Parent's Signature)

Any other relevant information: \_\_\_\_\_

| Check List.  | Yes | No  |
|--|-----|-----|
| Has the psychological/psychiatric report been delivered to the school with Enrolment form: | [ ] | [ ] |
| Has the Irish Exemption Certificate been included with Enrolment Form                      | [ ] | [ ] |

If not please forward to the school as soon as possible.

.....  
(DELETE AS APPROPRIATE)

I consent [ ] I do not consent [ ] to the publication of photographs of my child's involvement in school activities.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## PROPOSED FIRST YEAR CURRICULUM 2021/2022

Pupil's Name: \_\_\_\_\_

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

Primary School Attended: \_\_\_\_\_

The following subjects will be taken by all pupils:

|             |   |
|-------------|---|
| ENGLISH     | PHYSICAL EDUCATION (P.E.)                         |
| IRISH       | RELIGIOUS EDUCATION (R.E.)                        |
| MATHEMATICS | SOCIAL, PERSONAL & HEALTH EDUCATION<br>(S.P.H.E.) |
| SCIENCE     | CIVIC, SOCIAL & POLITICAL EDUCATION (C.S.P.E.)    |
| HISTORY     |   |
| GEOGRAPHY   |   |

In addition, three option subjects will be taken. Please select one subject from the option listed below:

### **Option 1 (Please tick preferred language)**

|        |  |
|--------|--|
| French |  |
| German |  |

### **OPTION 2 Please number the boxes in order of preference. e.g. 1,2,3**

|                    |  |
|--------------------|--|
| Art                |  |
| Business Studies   |  |
| Home Economics     |  |
| Metalwork          |  |
| Technical Graphics |  |
| Woodwork           |  |
| Music              |  |

If pupils wish to take French, German or Art for Leaving Certificate, we strongly advise that the subject be taken at Junior Certificate level. All other subjects can be taken up for the first time at senior level.

There is a maximum class size which may affect the availability of the subjects chosen but every effort will be made to cater for each pupil's needs.

Pupil's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_

Date: \_\_\_\_\_



# TULLOW COMMUNITY SCHOOL

The Mullawn,  
Tullow,

Co. Carlow

T: 059 9151473

F: 059 9151472

E: info@tullowcs.ie

W: tullowcommunityschool.ie

Pupil's Name: \_\_\_\_\_ Class: \_\_\_\_\_

## CODE OF BEHAVIOUR CONTRACT

**I agree to accept the Code of Behaviour and Policies of the school.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Student

I agree on behalf of my son/daughter that the Code of Behaviour is acceptable and I will support the school in upholding the standards set out under the Code.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent Guardian

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent Guardian

Email address: \_\_\_\_\_