



For office use only

Received:

Signature:

ENROLMENT ACCEPTANCE FORM

Please complete all sections of the following application using **BLOCK CAPITALS**.

I wish to accept the place being offered to my daughter/son:

(Student's Name) _____

According to Section 10 of our Admission Policy we request the following information:

Please list the other school(s) offering you admission:

School Name & Address _____

School Name & Address _____

Please list the other school(s) you are awaiting confirmation of an offer from:

School Name & Address _____

School Name & Address _____

SECTION 1: STUDENT DETAILS	
Forename:	
Surname:	
Date of Birth:	
Student's PPS No:	
Gender:	Female <input type="checkbox"/> Male <input type="checkbox"/>
Nationality:	
Mother's Birth Name:	
Address:	

SECTION 1: STUDENT DETAILS CONTINUED		
Eircode:		
Religion:		
Family Doctor:		Tel.:
Medical Card:	YES <input type="checkbox"/> NO <input type="checkbox"/>	

SECTION 2A: PARENTS'/GUARDIANS' CONTACT DETAILS		
	MOTHER / GUARDIAN 1	FATHER / GUARDIAN 2
First Name:		
Surname:		
Address:		
Eircode:		
Telephone number:		
Email address:		
Relationship to Student:		
Main telephone number to contact:		
Main email address to contact:		
Social Care/Foster Care:	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Please give details of any court orders or any other arrangements governing access to, or custody of the student:		

SECTION 2B: OTHER NAME & CONTACT	
Details of Other person in the event of parent/guardian not being available in case of sickness or an emergency.	
Name:	
Contact Telephone Number:	
Relationship to Student:	

I understand that it is my responsibility to inform the school of any change of address, telephone number(s), email address(s) or other relevant circumstances.

Signature of Parent/Guardian _____

SECTION 3: If the student currently has any siblings in this school, please indicate their name(s) and current year(s) of study.

Name:		Year:	
Name:		Year:	
Name:		Year:	
Name:		Year:	
Name:		Year:	

SECTION 4: Primary School currently attendend by the student.

School Name:	
School Address:	

SECTION 5: Any additional information the school may need to have (medical condition / allergy / other):

--

SECTION 6: Special Educational Needs.

In the current school has your child access to Learning Support? YES NO

Is there an Educational Psychological Assessment available? YES NO
If Yes, please send a copy of Educational Psychological assessment to the School.

Does your child have an Exemption from studying Irish? YES NO
If Yes, please send a copy of Department of Education & Skills Exemption Certificate to the School.

Date this exemption was granted: _____

****It is the responsibility of the parent/guardian to give copies of any Reports to the post primary school.**

We / I give our / my consent to teachers from Mercy Secondary School Ballymahon to collect information, both written and verbal from my child's current school.

Parent/Guardian Signature

Date

Department of Education and Skills Data Request Form
For the collection and return of student data by the school to the Department of Education and Skills.
Ref: Circular 0023/2016

Name of Student _____

Date of Birth of Student _____

What is the student's NATIONALITY? _____
(please use BLOCK CAPITALS)

Is English or Irish the MOTHER TONGUE of the student? _____
(answer YES or NO)

IN RESPECT OF THE NEXT QUESTION YOU MAY OPT NOT TO PROVIDE AN ANSWER.

To which ethnic or cultural background does the above-named student belong?
Please circle only one category (these categories used are based on the Census)

1. White Irish
2. Irish Traveller
3. Roma
4. Any other white background
5. Black or Black Irish – African
6. Black or Black Irish – any other Black background
7. Asian or Asian Irish – Chinese
8. Asian or Asian Irish – Any other Asian background
9. Other including mixed background
10. No consent

Signed: _____

Date: _____

This form should be retained by the school for the duration of the student's enrolment and made available for inspection by an officer of the Department or the Office of the Data Protection Commissioner, if required.

Mercy Secondary School Ballymahon

Photographs of Students

Our school maintains a database of photographs from school events held over the years. It has become customary to take photos of students engaged in activities and events in the interest of creating a pictorial as well as historical record of life at the school. Photographs of student's and in some cases including their name, may be published on our school website, app, on social media or in brochures, yearbooks, newsletters, local and national newspapers and similar school-related productions.

Consent is requested from each parent / guardian / student over 18. Should the parent / guardian / student over 18 wish to have his/her/their child's photograph removed from the school website, brochure, yearbooks, newsletters etc. at any time, we will duly comply on receipt of a written request to the school principal. Please note that any images/videos published by the school in yearbooks, newsletters, papers etc. up to this date, will remain in place based on previous consent given. No further images/videos will be published after the date of revocation.

Consent (tick one only)

1. If you are happy to have your child's photograph taken as part of school activities and included in all such records, tick here

2. If you would prefer not to have your child's photograph taken and included in such records, please tick here

3. If you are happy for your child's photograph to be taken and included, as 1. above, but would prefer not to have images of your child appear on the school website, in school brochures, yearbooks, newsletters etc., please tick here

Signed: _____
Parent/Guardian/Student (where over 18)

Date: _____

Enrolment Form Privacy Notice

Who is collecting the data – Data Controller

Mercy Secondary School
Ballymahon, Co. Longford, N39 P8C5.
T: 0906 432 267
E: info@mercyballymahon.ie

Personal Identifiable Information (School)

We collect personal identification information from students & prospective students in a variety of ways in connection with the delivery of education at our school. We will collect personal identification information from data subjects only if they voluntarily submit such information to us:

Student's Data (Lawful Basis: Public Interest, Consent, Legal Obligation):

Name; Surname; Date of Birth; PPS Number; Address; Nationality; Birth Certificate; Medical Conditions; Programme Subjects & Courses Exemptions; Medium of learning Irish/English; Psychometric Testing Results (where applicable); Religion; Psychological Assessment Results (where applicable); Book Rental Scheme; Transportation Scheme; Parent / Guardian Name; Phone Number; Home address; Mobile Number; Emergency Contact Person & No., Email, Mothers Maiden Name; Family Members (current / past); Medical Card; Name, Address & Tel. No. of GP, Previous Educational History.
Photos with classmates, tours, matches, awards etc.
CCTV Images.
Classroom based assessments and exam results;
State Examination Results;

How we use collected information

We use your personal data for purposes including:
your application for enrolment;
to provide you with appropriate education and support;
to monitor your academic progress;
to care for your health and well-being;
to care for our staff and students;
to process grant applications, fees and scholarships;
to coordinate, evaluate, fund and organise educational programmes;
to comply with our legal obligations as an education body;
to comply with our monitoring and reporting obligations to Government bodies;
to process appeals, resolve disputes, and defend litigation etc.

How we protect your information

We adopt appropriate data collection, storage and processing practices and security measures to protect against unauthorized access, alteration, disclosure or destruction of your personal information.

How long do we keep your personal information?

We keep your personal information for a length of time as per our Retention Policy i.e. For students, this generally means we will retain data for up to 7 years after a student has left the school. After this time, your data will be destroyed by confidential shredding or deletion from our school's database. In certain circumstances we may retain your data longer, these

circumstances and the retention period are outlined in Mercy Secondary School Data Protection Policy which is available to you on request.

Sharing your personal information

We do not sell or trade personal identification information to others. We may share your data with the State Examinations Commission, the Department of Education and Skills, NCSE, TUSLA, NDTI, An Garda Síochána, HSE, the Department of Social Protection, our Insurance Company, the Revenue Commissioners etc. The sharing of student personal data and the nature of what is shared depends on various factors. The Government bodies to which we transfer personal data will use that data for their own purposes (including: to verify other information they already hold etc.) and they may aggregate it with other information they already hold about the data subject and the data subject's family. We also share your personal data with other third parties including our insurance company and other service providers (including External Psychologists, Speech Therapists, IT providers, security providers, legal advisors etc). We are legally required to provide certain records relating to the progress of a student (under 18 years) in his/her education to the student's parents/guardians, including results of examinations.

Your rights

You have a number of rights in relation to your personal information. These rights include the right to:

request information regarding the personal data that we hold about you and the source(s) of that information. You can request a copy of any personal data we hold about you. This service is free of charge.

request that we rectify without undue delay any inaccuracies in relation to the personal data we hold;

in some circumstances, request the erasure of your personal data or object to the processing of your data;

obtain restriction of processing in some circumstances;

object to any processing in some circumstances;

in some circumstances, request that your personal data be transferred to you or a new school if the data is processed automatically (Please note, that we retain only a copy of certain data collected from you. Furthermore we do not avail of systems that make automated decisions based on your data);

if we are processing any data for which you have given consent, you may withdraw consent to us processing your personal data. This will not affect the processing already carried out with your consent; and

lodge a complaint with a supervisory authority. In Ireland, this is the Office of the Data Protection Commissioner;

Any enquiries regarding the above rights or if you wish to exercise any of these rights or any other rights provided for in this Statement please contact us.

This Enrolment Acceptance Form should be emailed to **enrolment@mercyballymahon.ie**

or posted to:

**Mercy Secondary School
Ballymahon,
Co. Longford.
N39 P8C5**

CHECKLIST

I have filled the following:

ENROLMENT ACCEPTANCE SECTION	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 1: STUDENT DETAILS	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 2: PARENTS'/GUARDIANS' CONTACT DETAILS	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 3: CURRENT SIBLINGS DETAILS	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 4: PRIMARY SCHOOL DETAILS	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 5: ANY ADDITIONAL INFORMATION	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION 6: SPECIAL EDUCATIONAL NEEDS	Yes <input type="checkbox"/> No <input type="checkbox"/>
DEPARTMENT OF EDUCATION AND SKILLS DATA REQUEST FORM	Yes <input type="checkbox"/> No <input type="checkbox"/>
PHOTOGRAPHY CONSENT FORM	Yes <input type="checkbox"/> No <input type="checkbox"/>

PLEASE POST OR EMAIL TO SCHOOL FOLLOWING DOCUMENTS:

1. Copy of Birth Certificate (this will not be returned).
2. Copy of Educational Psychological Assessment (if applicable)
3. Copy of Department of Education & Skills Exemption Certificate (if applicable)

Signature of Parent (1) Mother _____

Signature of Parent (2) Father _____

Signature of Legal Guardian: (if applicable) _____

Student Name:(BLOCK CAPITALS) _____

Date: _____