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| Eolas Ginearálta  *General Information* | |
| Ainm an Pháiste  *Child’s Name* |  |
| Dáta Breithe  *D.O.B* |  |
| Áit sa Teaghlach  *Place in Family* |  |
| Seoladh  *Address* |  |
| Dáta a thosaigh sa Naíonra  *Date first attended Naíonra* |  |
| Dáta a chríochnaigh sa Naíonra  *Date ceased to attend Naíonra* |  |
| Ainm Tuismitheora/Cúramóra 1/  *Name of Parent/Caregiver 1* |  |
| Seoladh  *Address* |  |
| Uimhir Theileafóin (Baile)  *Telephone Number (Home)* |  |
| Uimhir Theileafóin (Obair)  *Telephone Number (Work)* |  |
| Uimhir Fóin Phóca  *Mobile Phone Number* |  |
| Ainm Tuismitheora/Cúramóra 2  *Name of Parent/Caregiver 2* |  |
| Uimhir Theileafóin (Baile)  *Telephone Number (Home)* |  |
| Uimhir Theileafóin (Obair)  *Telephone Number (Work)* |  |

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| Uimhir Fóin Phóca  *Mobile Phone Number* |  |
| Teagmhálaí i gcás éigeandála (mura féidir teagmháil a dhéanamh le tuismitheoirí/cúramóirí an pháiste)  *Contact in case of emergency (in the event that parents/caregivers cannot be contacted)* | **Ainm/Name:**  **Uimhir/Number:**  **Gaol leis an bpáiste/Relationship to Child:** |
| Cúrsaí Sláinte  *Health* | |
| Dochtúir Teaghlaigh  *Family Doctor* | **Ainm/Name**  **Uimhir/Telephone Number** |
| Stair Leighis an pháiste (tinneas, míchumas, ailléirge nó eile)  *Child’s Medical History (any illness, disability, allergy, etc.)* |  |
| An bhfuil sainchúram agus aird faoi leith ag teastáil? Tabhair sonraí le do thoil.  *Is special care and attention needed? If yes please give details.* |  |

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| Imdhíonadh/Immunisation  Leicneach/Bruitíneach/Bruitíneach Dhearg (MMR)  *Mumps/Measles/Rubella*  Diftéire, Teiteanas, Triuch  *Diphtheria/Tetanus/Whooping Cough*  Eitinn (BCG)  *Tuberculosis (BCG)*  HIB  Teanndháileog Bhéil Pholaimiailítis  *Oral Polio*  Meiningíteas C  *Meningitis C* | | | | Please circle  Fuair Ní bhfuair  *Yes No*  Fuair Ní bhfuair  *Yes No*  Fuair Ní bhfuair  *Yes No*  Fuair Ní bhfuair  *Yes No*  Fuair Ní bhfuair  *Yes No*  Fuair Ní bhfuair  *Yes No* | | | | | | |
| An raibh aon cheann de na galair seo a leanas ar do pháiste riamh?  *Did your child have any of the following diseases?*  *Cuir tic sa bhosca/Please tick* | | | | |  |  |  |  | | --- | --- | --- | --- | | Galar/Disease | Bhí/Yes | Ní raibh/No | Dátaí/Dates | | Bruitíneach Dhearg  *Rubella* |  |  |  | | Bruitíneach  *Measles* |  |  |  | | Deilgneach  *Chicken Pox* |  |  |  | | H1N1 (Fliú na Muc)  *H1N1 (Swine Flu)* |  |  |  | | Leicneach  *Mumps* |  |  |  | | Triuch  *Whooping Cough* |  |  |  | | | | | | | |
| I gcás timpiste nó éigeandála, an bhfuil cead ag an Naíonra an páiste a thabhairt chuig an ospidéal?  *In the event of an emergency or accident, do you give permission to have your child brought to hospital by the naíonra?* | | | | Tá Níl  Yes No | | | | | | |
| Bia: Aiste Bia Speisialta, Bia a thaitníonn/nach dtaitníonn leis an bpáiste, etc.  *Food: special diet, likes/dislikes, etc.* | | | |  | | | | | | |
| Aon eolas riachtanach/cabhrach eile?  *Anything else we should know about your child?*  Ailléirgí/*Allergies*  Asma/*Asthma*  Céiliach/*Coeliac*  Deacracht Chainte/*Speech Difficulty*  Deacracht Éisteachta/*Hearing Difficulty*  Diaibéiteas*/Diabetes*  Haemaifilia/ *Haemophilia*  Titimeas/*Epilepsy,* etc. | | | | Eolas Breise Más Cuí/Additional Information if necessary | | | | | | |
| An Ghaeilge | | | | | | | | | |
| Cumas sa Ghaeilge (Cuir ciorcal timpeall an freagra cuí)  *Ability in Irish (Please circle relevant answer)* | | | | | | | | | |
| Tusimitheoir/Cúramóir 1  *Parent/Caregiver 1* | Cainteoir Dúchais  *Native Speaker* | | Gaeilge Mhaith  *Competent* | | | Beagán Gaeilge  *Some Irish* | Tuiscint  *Understanding* | | Gan Ghaeilge  *No Irish* |
| Tusmitheoir/ Cúramóir 2  *Parent/Caregiver 2* | Cainteoir Dúchais  *Native Speaker* | | Gaeilge Mhaith  *Competent* | | | Beagán Gaeilge  *Some Irish* | Tuiscint  *Understanding* | | Gan Ghaeilge  *No Irish* |
| An Páiste  *The Child* | Cainteoir Dúchais  *Native Speaker* | | Gaeilge Mhaith  *Competent* | | | Beagán Gaeilge  *Some Irish* | Tuiscint  *Understanding* | | Gan Ghaeilge  *No Irish* |
| Úsáid Teanga sa Teaghlach/Language Use at Home | | | | | | | | | |
| Nuair a labhraíonn an tuismitheoir/cúramóir seo leis an bpáiste sa bhaile, labhraíonn sé/sí:  *When this parent/caregiver is speaking to the child s/he speaks*:  (Cuir Tic sa Bhosca/ *Put a Tick in the Box*) | | | | | Tuismitheoir/Cúramóir 1  *Parent/Caregiver 1* | | | Tuismitheoir/Cúramóir 2  *Parent/Caregiver 2* | |
| A Leath agus a leath/*Half Irish, Half English* | | | | |  | | |  | |
| Béarla Amháin/*English Only* | | | | |  | | |  | |
| Corrúsáid Ghaeilge/*Occasional Use of Irish* | | | | |  | | |  | |
| Gaeilge Amháin/*Irish Only* | | | | |  | | |  | |
| Gaeilge den chuid is mó, roinnt Béarla/*Mostly Irish, some English* | | | | |  | | |  | |
| Roinnt Gaeilge, Béarla den chuid is mó/*Some Irish, Mainly English* | | | | |  | | |  | |
| Teanga Eile. Tabhair sonraí/*Another Language. Give details .* | | | | |  | | |  | |
| Eile/Other | | | | | | | | | |
| An dtugann tú cead do do pháiste dul ar thurais oifigiúla leis an naíonra?  *Do you give permission for your child to go on official outings with the naíonra?* | | **Tugaim Ní thugaim**  **Yes No** | | | | | | | |
| An dtugann tú cead don naíonra grianghraif/físeáin de do pháiste a ghlacadh agus é/í i mbun gníomhaíochtaí leis an naíonra?  *Do you give permission for your child to have their photo taken/be on video in relation to naíonra activities?* | | **Tugaim Ní thugaim**  **Yes No** | | | | | | | |
| An dtugann tú cead d’fhoireann an naíonra uachtar gréine a chur ar do pháiste?  *Do you give permission to the naíonra to apply sunscreen to your child?* | | **Tugaim Ní thugaim**  **Yes No** | | | | | | | |
| An dtugann tú cead do mhic léinn (faoi mhaoirseacht an Phríomhstiúrthóra/an Bhainisteora breathnóireacht a dhéanamh ar do pháiste?  *Do you give permission to students (under the supervision of the main naíonra leader/manager to observe your child?* | | **Tugaim Ní thugaim**  **Yes No** | | | | | | | |
| Mura féidir leat do pháiste a bhailiú ón naíonra, an bhfuil éinne eile ann a bhfuil cead acu an páiste a bhailiú i d’áit?  *If you are unable to collect your child from the naíonra, does anybody else have permission to collect him/her in your absence?* | |  | | | | | | | |

Sínithe ag/Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gaol leis an bpáiste/Relationship to Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dáta/Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D’úsáid Oifigiúil Amháin/For Official Use Only**

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| Foirm ‘Ag Cur Aithne ar do Pháiste’ líonta isteach | Tá [ ] Níl [ ] Má tá, dáta: |
| Comhaontú maidir le Cóir Leighis líonta isteach | Tá [ ] Níl [ ] Má tá, dáta: |
| Dáta le tosú:  Dáta le críochnú: |  |
| Cineál: | Lá iomlán [ ] Maidin [ ] Tráthnóna [ ] |
| Éagsúlachtaí ón méid thuas: |  |
| Nótaí |  |