



SCHOOL ADMISSION PRE-ENROLMENT APPLICATION FORM

CHILD'S PERSONAL DETAILS	OFFICE USE ONLY
CHILD'S FIRST NAME (<i>as on Birth Certificate</i>): _____	FORM ACCEPTED BY: _____
CHILD'S LAST NAME/SURNAME (<i>as on Birth Certificate</i>): _____	DATE FORM ACCEPTED: _____
DATE OF BIRTH: _____ GENDER: _____ CHILD'S P.P.S. NUMBER: _____	DECISION: _____
ADDRESS: _____	PLACE OFFERED ☐
_____ EIRCODE: _____	WAITING LIST ☐
PREVIOUS SCHOOL (AND CLASS)/PLAYSCHOOL/CRÉCHE: _____	IF PLACE OFFERED, DATE OFFER MADE: _____
_____	IF PLACE ACCEPTED, DATE OFFER ACCEPTED: _____
DO YOU GIVE PERMISSION TO CONTACT THIS SCHOOL/PLAYSCHOOL/CRÉCHE? YES ☐ NO ☐	_____

CHILD'S FAMILY DETAILS	
MOTHER'S FULL NAME: _____	FATHER'S FULL NAME: _____
ADDRESS & EIRCODE: _____	ADDRESS & EIRCODE: _____
_____	_____
_____	_____
PHONE NUMBER: _____	PHONE NUMBER: _____
EMAIL: _____	EMAIL: _____
NAMES OF BROTHERS CURRENTLY ATTENDING SCOIL BHRÍDE BUACHAILLÍ: _____	
NAMES OF BROTHERS WHO ARE PAST PUPILS OF SCOIL BHRÍDE BUACHAILLÍ: _____	
NAMES OF SISTERS CURRENTLY ATTENDING SCOIL BHRÍDE CAILÍNÍ: _____	

DECLARATION	
This application is for a place in a mainstream class.	
I/We acknowledge that the completion of this form and its submission to the office at Scoil Bhríde Buachaillí does not constitute the offer of a place in the school to my son and that I/we will be contacted regarding this in due course.	
I/We declare the above information to be correct and understand that it will be treated as confidential and shared with the Department of Education and other educational organisations only as necessary.	
I/We have enclosed original copies of a Birth Certificate and two utility bills (from different providers) as proof of address. <i>These documents will be photocopied and returned.</i>	
Signed: _____	Date: _____
Signed: _____	Date: _____