**St John’s (Church of Ireland) National School**

Tower Road, Clondalkin, D22 YN52

Roll No. 18642Q

Tel. 01 4570680

E-mail secretary@stjohnsnsclondalkin.com

**APPLICATION FORM**

**Pupil Forename: Pupil Surname:**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARENT/GUARDIAN**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: ADDRESS:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**TEL. NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEL. NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
EMAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Does the child have a sibling currently in the school? Yes No**

Please note that siblings do not have an automatic right to admission.

**Proposed date of admission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Please note that Junior Infants must be 4 years by 1st day of year of entry***

**Class (if other than Junior Infants): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Schools previously attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If you wish to be considered for Priority Category no.2 or 3 as a member of a Minority Religion, please complete this part of the from.**

|  |  |  |
| --- | --- | --- |
| Religious Denomination: | Child: | Parish |
| Name of Rector, Minister, Pastor etc.:Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Additional Information:  |

**Completion of an application does not guarantee a place. Places are offered in accordance with school admissions policy**

**Please include:**

A birth certificate

Proof of address

Confirmation of the applicant student being a member of a minority religion (where applicable)

Evidence to support this statement as outlined in Admissions Policy

I declare that everything I have stated on this form is true and accurate and that I am aware that an untrue statement on this or subsequent forms could lead to the withdrawal of any offer of a place or the removal of the applicant from the school.

Signature of parents or guardian

1\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All information is handled with the strictest confidentiality.

**Acknowledgement of Application Form will be sent by email only.**

**Information provided will be retained for the specific purpose of Admission, applicants who are successful will have this information retained in the pupil’s school file, those who are unsuccessful the information will be retained for one year.**

**OFFICE USE ONLY**

**Please note that decisions regarding enrolments are made by the Board of Management during the school year before entry and that each decision takes into account availability of places, date application received, priority according to Admissions Policy.**

**OFFICE: date received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**