ST. PATRICK'S NATIONAL SCHOOL

Church Road, Greystones, Co Wicklow. A63 EY42



Phone: 01 287 5684 Email: admin@stpns.ie Website: www.stpns.ie

Roll: 12554M

ENROLMENT APPLICATION FORM

Please use capital letters. All sections must be fully completed.

Child's surname	First name(s)
Date of Birth	Religious Denomination (if any)* Please see below
Home address	
Desired date of admission	Class
Are you looking for a space in our ASD class Please include your child's ASD report	Yes No
Mother's name	Father's name
Home address If different from above	Home address If different from above
Mobile	Mobile
Work	Work
Home	Home
Email	Email
MINORITY RELIGIOUS DENOMINATION:	
is a mem	nber of a minority religion and l/we wish him/her to be
educated in a school that provides a programme	e of religious instruction/education which is the same
or has a similar ethos to that religious ethos.	
Please tick as appropriate: 🛛 Yes	🗆 No
If you have ticked Yes to the above statement, yo	ou must provide evidence that your child is a membe
of a minority religion by:	

- 1. A letter from the relevant Church Leader confirming that your child is a member of a minority religion, *or*
- 2. Completion of the Religious Domination Verification below (*) by the relevant Church Leader that your child is a member of a minority religion, *or*
- 3. A baptismal record issued by the relevant minority religion which confirms your child has been baptised as a member that religion.

* Religious Denomination Verification (to be completed by relevant Church Leader)						
(child's name) is resident in						
and is a member of	faith.					
I confirm that the details of religious denomination herewith are correct.						
Signed	(Church Leader)	Date				
Telephone no	Stamp					

Principal: Rachel Harper | Deputy Principal: Heather Jordan Board of Management Chair: Canon David Mungavin

Previous Schools	Please list previous school(s) attended	by the applicant
School		Class / Grade
If you have other childro	en already attending primary or post-p	rimary school, please indicate below:
Child's name	School	Class / Grade

DECLARATION AND ACKNOWLEDGEMENT I/We acknowledge that I/we have read and accept the school's: □ Characteristic Spirit & Ethos Statement Code of Behaviour I/We also include with this application: □ Copy of child's Birth Certificate Copy of Utility Bill (dated within the last 3 months) □ Evidence confirming membership to a minority religion (where applicable) □ Copy of child's ASD report (where applicable) I/We hereby declare that all information submitted as part of this application is true and accurate. _____ Signed _____ Signed ____ Father Mother _____ Date _____ Date ___

Please note:

- 1. Any information found to be untrue could result in the enrolment application being void.
- 2. All information submitted may be the subject of a request for verification.
- 3. It is a condition of enrolment that parents support the Board of Management in its implementation of all school policies.
- 4. The Board of Management reserves the right to seek further information.
- 5. In the interests of accommodating school admission demands, applications may be the subject of correlation with other schools in the area.

FOR OFFICE USE ONLY	(
APPLICATION RECEIVED		ACKNOWLEDGED		
POLICIES ACCEPTED	ENROLMENT	CHARACTERISTIC	CODE OF BEHAVIOUR	
		SPIRIT AND ETHOS		
DOCUMENTS RECEIVED	BIRTH	MEMBERSHIP TO	UTILITY BILL	
	CERTIFICATE	RELIGION		
PLACE OFFERED		NOTES		
WAITING LIST REQUEST				