

St. Brigid's B.N.S.

Howth Road, Killester, Dublin 5 D05A386 Phone 01 8336149



Email: info@stbrigidsbns.ie Website: www.stbrigidsbns.ie

APPLICATION FOR ADMISSION - OTHER CLASSES

This is an application form for admission and does not constitute an offer of a place, implied or otherwise.

Year 2020/ 2021 only			Class					
Pupil's Surname			Pupil's First Name					
Pupil's PPS Number			Date of Birth					
Address (Primary Residence)								
Religion			Home Telephone number					
Mother's Details	Name	Occupation (for Registration purposes)		Mobile Number				
Father's Details	Name	Occupation (for Registration purposes)		ristration purposes)	Mobile Number			
Email Address:								
Name and address of current school:								
Brothers/S	isters Name		Age	School Atten	ding			
	1)		••••					
	2)							
	3)		••••					
	4)		••••					

Completed enrolment forms may be submitted with relevant documentation to the Secretary at the school.

The following items to accompany the application form:

- An original Birth Certificate (will be copied and returned)
- Baptismal Certificate (if applicable)
- Proof of address showing name and address of Parents *(these must be dated in Nov/Dec 2019 or Jan 2020)
- Most Recent School Report

*Acceptable documents for Proof of Address: Original Utility Bill such as Electricity, Landline Phone, Gas, Cable TV, Broadband, Statement from Bank/Building Society/Credit Union, Letter from Dept. Social Protection/Revenue. Other official correspondence from an Irish State Agency. NB mobile phone and waste collection bills are not acceptable.

All of the information you provide in this Application Form is taken in good faith. If any of the information is incorrect, misleading or incomplete, then your application may be rendered invalid and any offer made regarding your son will be cancelled (even if you have accepted it).

We reserve the right to use any appropriate means to verify proof of primary residence.

Additional Information:

If your child has had any developmental difficulties/delays, and should you possess a professiona						
report concerning such (e.g. reports on hearing, vision, speech and language or behaviour) we						
would appreciate a copy for our records. We may be able to access resource teaching hours from						
the Department of Education & Skills should your child be entitled to them.						

Please give details:							
C							
health, but do not have pro Health Centre as soon as p child's chance of a place in	ofessional repo ossible. (Repo n school.) If y	orts, you sh orting prob ou have an	aring, vision, speech and language, behaviour or could consult with your G.P. or visit your nearest plems of this nature will not jeopardise your my queries or concerns about your son's with the Principal as early as possible.				
Medication :							
Is your child on any long-term	n medication?						
If Yes, please give details							
Does your child suffer from	n any medical	condition	that may necessitate the administration of				
emergency medicine/treati	nent on the sc	hool premi	ises?				
•		-					
acknowledge that the onle criteria and requirement information given on this complete. I guarantee th	y entitlement s set out in th s form and in at I will bring	to an offer the school E any accor g any char	school's website, revised in November 2019. It of a place is through the application of the Enrolment Policy. I confirm that all impanying documents is true, accurate and inge to any information provided on this form, tention of the school in writing as soon as I am				
Signature:			_ Date:				
	Date:						
	nent Policy is		on request from Secretary's office or on school				
OFFICE LISE ONLY	VES	NO					

FOR OFFICE USE ONLY	YES	NO			
Birth Certificate					
Baptismal Certificate (if applicable)					
Proof of Address:	Elec/ Gas	Landline Telephone	Bank Statement	Revenue Letter	Other official correspondence from an Irish State Agency
Most Recent School Report					