**ENROLMENT APPLICATION FORM**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Pupil’s Details** |  | | | |
| Name: |  | | | |
| Date of Birth: |  | | | |
| Gender: |  | | | |
| School Year due to start: |  | | | |
| **Contact Details** |  | | | |
| Address: |  | | | |
| Eircode: |  | | | |
| **Parent / Guardian Details:** |  | | | |
| Mother’s Name: | Father’s Name: | | | |
| Phone Number (Mobile): | Phone Number (Mobile): | | | |
| Phone Number (Home): | Phone Number (Home): | | | |
| Phone Number (Work): | Phone Number (Work): | | | |
| Mother Email: | Father Email: | | | |
|  |  | | | |
| Siblings attending Scoil Naomh Treasa: |  | | | |
| **Pre-School / Previous School Attended** (if applicable) | |  | | |
| Name of Pre-School / School: | |  | | |
| Address: | | Phone Number: | | |
| Current class group (if moving from another school): | |  | | |
|  | |  | | |
| *Please tick* | | | *Yes* | *No* |
| **Have you attached a Birth Certificate for your child?** | | |  |  |

**Signature of Parent / Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**