



ST. BRIGID'S GIRLS NATIONAL SCHOOL  
 Roll no. 16792C  
 Email: [info@stbrigidsqns.ie](mailto:info@stbrigidsqns.ie)  
 Telephone: 8315138  
 Príomhoide: Lorna Diffley  
 Príomhoide Tánaisteach: Laura Wickham

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

Year <b>September 2017</b> only			
Pupil's Surname		Pupil's First Name	
Pupil's PPS Number		Date of Birth	
Address: (Primary Residence)		Home Telephone Number	
		Religion	
Mother's Details:	Name:	Occupation (for registration purposes)	Mobile Number
Father's Details:	Name:	Occupation (for registration purposes)	Mobile Number
Email address			
Name and address of pre-school			
Brother/Sisters	Name	Age	School Attending
	1).....	.....	.....
	2).....	.....	.....
	3).....	.....	.....
	4).....	.....	.....
Completed enrolment forms may be submitted with the relevant documentation to The Secretary at the School from January 9 <sup>th</sup> 2017 up to and including 5pm on January 31 <sup>st</sup> 2017.			

The following items to accompany the application form:

- An Original Birth Certificate
- Baptismal Certificate (if applicable)
- **Two** documents showing name and address of Parents \* (these must be dated in Nov/Dec 2016 or Jan 2017)

**\*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 daughter will be cancelled (even if you have accepted it). We reserve the right to use any appropriate means to verify proof of primary address.

**Additional Information:**

If your child has had any developmental difficulties/delays, and should you possess a professional 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. If you have any concerns regarding your child’s hearing, vision, speech and language, behaviour of health, but do not have professional reports, you should consult with your G.P or visit your nearest Health Centre as soon as possible. (Reporting problems of this nature will not jeopardise your child’s chance of a place in school. If you have any queries or concerns about your daughter’s development, please make an appointment to meet with the Principal as soon as possible.

**Medication:**

Is your child on any long-term medication? \_\_\_\_\_

If yes, please give details: \_\_\_\_\_

Does your child suffer from any medical condition that may necessitate the administration of emergency medicine/treatment on the school premises? \_\_\_\_\_

**I have read and accept the School Enrolment Policy, Code of behaviour Policy and Anti-Bullying Policy uploaded to the School’s website. I acknowledge that the only entitlement to an offer of a place is through the application of the criteria and requirements set out in the School Enrolment Policy. I confirm that all information given in this form and in any accompanying documents is true, accurate and complete. I promise that I will bring any change in any information up to and including 31<sup>st</sup> January 2017 to the attention of the School in writing as soon as I am aware of any change.**

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

- A copy of the School Enrolment Policy is available on request from the Secretary’s office or on the school website [www.stbrigidsgns.ie](http://www.stbrigidsgns.ie)
- The Board of Management strongly recommends that prospective Junior Infant pupils be at least 4 years of age on or before 30<sup>th</sup> April 2017.

**Principal’s Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b><u>FOR OFFICE USE ONLY</u></b>	YES	NO			
Birth Certificate					
Baptismal Certificate					
Proof of Address: <i>(tick the relevant two)</i>	Elec/ Gas	Landline Telephone	Bank Statement	Revenue Letter	Other official correspondence from an Irish State Agency



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