

St. Francis of Assisi Primary School, Belmayne.

Application Form for entry to **Junior Infants**

Year of Entry: **2019**

This form must be accompanied by the following: Original Birth Certificate and utility bill (no older than 3 months)

Please use BLOCK CAPITALS and complete all sections of this form

Child's Name: Surname:	Date of Birth:
Gender: Male Female	Country of Birth:
Nationality: If dual citizenship: where Irish is one, please choose Irish	Is your child's mother tongue (i.e. language spoken at home) Irish or English? YES: <input type="checkbox"/> NO: <input type="checkbox"/>
Address:	Number of years living in Ireland (if not born here):
	Number of children in family:
	Child's place in family:
Religion:	P.P.S. Number:
Siblings already attending this school:	Siblings applying this year also:

<u>Mother's Information</u>	<u>Father's Information</u>	<u>or Guardian's Information</u>
Name:	Name:	Name:
Surname:	Surname:	Surname:
<i>Maiden Surname:</i>		Relationship to Child:
Country of Birth:	Country of Birth:	Country of Birth:
Occupation:	Occupation:	Occupation:
Contact/Mobile Phone:	Contact/Mobile Phone:	Contact/Mobile Phone:
E-mail:	E-mail:	E-mail:

Has your child attended pre-school?	Yes / No
Name of pre-school:	From / To:
Has your child been referred for any of the following?	
Speech Therapy? Yes / No	Occupational Therapy? Yes / No
Psychiatric / Psychological Assessment? Yes / No	
Does your child have Special Needs? Yes / No	(If yes, please make an appointment to see the Principal)
Does your child have any medical conditions / allergies? Yes / No	
(If yes, please describe briefly)	

Please note that the information provided on this form will be added onto the Primary Online Database (POD), as required by the Department of Education & Skills for all children attending Primary School in Ireland.

The submission of this completed application form and accompanying documents does not guarantee an offer of a place. Please see the School Enrolment Policy for 'Procedure for Offering Places'. CLOSING DATE 10TH JANUARY 2019

Signature of Parent (s) / Guardian: _____ & _____

Date: _____	Office Use. Enrolment Policy Given: _____	Date Received: _____	
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