

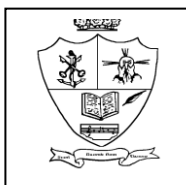
SCOIL NAOMH EOIN BAISTE

Buachaillí Sóisearacha

Príomhoide: John O'Sullivan

Príomhoide Tánaisteach: Áine Duffy

Secretary: Marguerite Cullen



ST. JOHN THE BAPTIST

Junior Boys School

Roll No. 19006Q

E-mail: belgrovejbs@eircom.net

Telephone: 8336539 FAX : 8533045

APPLICATION FOR ADMISSION - Senior Infants, 1st Class or 2nd Class

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

| | | | | |
|---|--|---|---|-----------------------------------|
| Year September 2018 only <i>(please tick /)</i> | Senior Infant <input type="checkbox"/> | 1st <input type="checkbox"/> | 2nd <input type="checkbox"/> | |
| Pupil's Surname | | Pupil's First Name | | |
| Pupil's PPS Number | | Date of Birth: | | |
| Address: (Primary Residence) | | | Eircode: | |
| Religion | | Home Telephone number: | | |
| Parish - <i>(please tick /)</i> | St. Anthony <input type="checkbox"/> | St. Gabriel <input type="checkbox"/> | St. John <input type="checkbox"/> | Other <input type="checkbox"/> |
| Mother's Name, Occupation and Mobile number | Name: | Occupation (for Registration purposes) | Mobile Number | |
| Father's Name, Occupation and Mobile Number | Name: | Occupation (for Registration purposes) | Mobile Number | |
| Email Address | | | | |
| Name and address of school: | | | | |
| Current Class: | | | | |
| Brothers/Sisters | Name | Age | School Attending | |
| 1)..... | ..... | ..... | ..... |  |
| 2)..... | ..... | ..... | ..... |  |
| 3)..... | ..... | ..... | ..... |  |
| 4)..... | ..... | ..... | ..... |  |

Completed enrolment forms may be submitted with relevant documentation to The Secretary at the School on and from 1 November 2017 up to and including 4 p.m. on **31st March 2018**.

The following items to accompany the form:

1. An Original Birth Certificate (together with a photocopy) and
2. An Original Roman Catholic Baptismal Certificate (together with photocopy) if applicable.
3. Hard copies (not online) of **Two** of the following showing name and address of the Parents (these must be dated not more than 3 months old prior to the date application is submitted):
 - (1) Electricity bill
 - (2) Gas bill
 - (3) Landline Telephone bill
 - (4) Original correspondence from the Revenue Commissioners
 - (5) Original or solicitor certified copy of a lease or property registration document in the name of the Parents.

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 professional report concerning such (e.g. reports on hearing, vision, speech and language or behaviour) it is important that you submit these as soon as possible. This will assist us in deciding what level of support we may be able to offer your son. If you have any concerns regarding your child’s hearing, vision, speech and language, behaviour or 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 son’s development, please make an appointment to meet with the Principal as early 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:

Yes

No

I have read the School Enrolment Policy as revised on 9th October, 2017 and uploaded to the Schools’ 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 March 2018 to the attention of the School in writing as soon as I am aware of the change.

Signature: _____ Date: _____

_____ Date: _____

Notes:

- ¹ Copy of School Enrolment Policy is available on request from Secretary’s office or on school website www.belgrovejbs.ie

Principal’s Signature _____ Date _____

For Office Use Only

| | Yes | No |
|--------------------------------------|--------------------------|--------------------------|
| Birth Certificate | <input type="checkbox"/> | <input type="checkbox"/> |
| Roman Catholic Baptismal Certificate | <input type="checkbox"/> | <input type="checkbox"/> |
| | Landline Telephone | Revenue Letter |
| Electricity | Gas | Lease |
| Evidence of Address: | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |