

**Application Form for Admission**

Application to have pupil enrolled for school year \_\_\_\_\_ in \_\_\_\_\_ class.

Full Name of Child \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_

**(Please supply copy of Child's Birth Certificate)**

Child's PPS Number \_\_\_\_\_

**(tel. 01 7043281 to obtain your child's PPS number)**

Full name/s of Parent/s or Guardian/s \_\_\_\_\_

Address of Parent/s or Guardian/s \_\_\_\_\_

(please provide **proof of address** dated no less than 3 months prior to date on this application)

**Eircode** \_\_\_\_\_

Parent/s / Guardian/s email addresses & telephone numbers \_\_\_\_\_

Name of Previous School ( if applicable ) \_\_\_\_\_

Class in Previous School \_\_\_\_\_

**\*\*For applicants who are members of Church of Ireland, Reformed Anglican Church or a minority religion – see Admissions Policy, Section 5, regarding Priority Category 1 and 2 applicants. Please provide statement as detailed in point 1 and a copy of Baptismal Cert or letter from Church Leader as detailed in point 2.\*\***

**Please sign the following Declaration:-**

I/we confirm that the information given above is true and accurate and I / we have read and accept the **Ethos Statement** of Glasnevin National School.

I/we have read the School **Code of Behaviour** and agree to abide by said Code and Rules.

**Signature of Parent/s or Guardian/s** \_\_\_\_\_

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

**Note:** Information supplied on this form will be stored in accordance with the school's Data Protection Policy.