

St. Paul's Primary School,
c/o Scoil Carmel
O'Connell Avenue
Limerick



Scoil Phóil Naofa,
c/o Scoil Carmel
Ascaill Uí Chonaill
Luimneach

Tel: (061) 224891
Email: stpaulsdooradoyle@gmail.com
Web www.stpaulsdooradoyle.ie

Dear Sir /Madam,

To follow please find an Application Form for you to complete and return at your earliest convenience. All Sections must be completed and supporting documents attached, if not, then the Application will not be processed.

PLEASE NOTE:

Completing this application is neither an offer nor a guarantee of a place in St. Paul's School. Following receipt of your application we will require that you confirm your interest in the September preceding the proposed enrolment year.

All applications received will be acknowledged.

If you have any queries or questions please do not hesitate to call.

Thanking You,

Yours Sincerely

A handwritten signature in black ink, appearing to read 'J. Tuohy'.

John Tuohy
Principal

A handwritten signature in black ink, appearing to read 'M. Cahill'.

Marion Cahill
School Administrator

ST Paul's School Admissions Application Form

St. Paul's Primary School,
c/o Scoil Carmel,
O'Connell Avenue,
Limerick



Scoil Phóil Naofa
c/o Scoil Carmel
Ascaill Uí Chonail
Co. Luimní

Tel: (061) 224 891

Email: stpaulsdooradoyle@gmail.com

SECTION 1

Please complete clearly in block letters using black ink.

Surname of Pupil:

First Name of Pupil:

Date of Birth:

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Gender:

Female

Male

(Please tick as appropriate)

Name of Parent(s) or Adult(s) with parental responsibility:

Title (Mr.Mrs.Ms.Miss)

Initials

Surname

Mobile Number

Current Address at time of Application:

Eircode

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See <https://finder.eircode.ie/> for Eircode

Pupil's PPS Number

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Does your child have a statement of Special Needs or Health Issues? if yes, please specify _____

No. of Children in the Family: _____

Placing of child (1st, 2nd etc.): _____

Nationality of Pupil: _____

Religion: _____

E-Mail Address of Parent(s): _____

SECTION 2

Year of proposed entry to St. Paul's

Enrolment in Standard (Juniors, Seniors, 1st etc.)

SECTION 3

Details of any brothers or sisters currently attending St. Paul's:-

Name

Class

_____	_____
_____	_____

SECTION 4

Has your son/daughter attended pre-school, if yes, please state which pre-school? _____

Has your son/daughter attended another school previously? _____

If yes, please state which school _____

Reason for Transfer: _____

SECTION 5

I declare that all the information provided on this form is correct and agree that this Application Form does not guarantee my child enrolment at St. Paul's National School.

Signature of Parent or legal carer: _____ Date _____

NOTE:

Before submitting your application please make sure that you have.....

- A. Completed all the relevant sections of the Application Form
- B. Signed and dated the Declaration (Section 5)
- C. Included an Original Birth Cert and a Current Utility Bill in Parent's name (Recent ESB/Gas/ Telephone) as proof of your address.
- D. Included a recent School Report from the school your child is transferring from if applying for a standard OTHER than Junior Infants.

YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THE ABOVE

PLEASE NOTE:

This is neither an offer nor a guarantee of a place in St. Paul's School.

Following receipt of this application we will require that you confirm your interest in the September preceding the proposed enrolment year.

There is no carry over of applications from year to year. A new application is required for each academic year.

Decisions in relation to applications for enrolment are made by the Board of Management in accordance with school policy.

All of the information you provide in this Application Form is taken in good faith and will be treated with the strictest of confidence and only used for the benefit of your child. If it is found that any of the information is incorrect, misleading or incomplete, the application will be rendered invalid. We reserve the right to use any necessary means to verify proof of primary residence.

**Closing date for receipt of Applications for Junior Infants starting September 2018 is
October 25th, 2017**

OFFICE USE ONLY

Date Received: _____

Code Assigned: _____