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| C:\Users\sean2\Documents\Sue Holly\Logo\Logo.jpg | **APPLICATION TO ENROL FOR SENIOR INFANTS – 6th CLASS ST. PATRICK’S GIRLS’ SCHOOL, HOLLYPARK**  **Foxrock Avenue, Dublin 18**  **Telephone 01-2893293 - Email:** [**hollyparkgns@gmail.com**](mailto:hollyparkgns@gmail.com)  **Enrolment will be assessed in accordance with the Enrolment Policy**  **in place at the time of application.** | | | | | | | | | |
| SURNAME: | | | NAME: | | | | PPS NO: | | | DATE OF BIRTH: |
| SURNAME IN IRISH:  (if applicable) | | | RELIGION: | | | PARISH: | | | NATIONALITY: | |
| HOME ADDRESS: | | | | | | | | | | |
| EIRCODE: | | | | | HOME PHONE: | | | | | |
| WHO DOES THIS CHILD RESIDE WITH? | | | | | | | | | | |
| MOTHER’S/GUARDIAN’S NAME: | |  | | FATHER’S/GUARDIAN’S NAME: | | | |  | | |
| LEGAL GUARDIAN | | Y / N | | LEGAL GUARDIAN | | | | Y / N | | |
| MOBILE NO: | | | | MOBILE NO: | | | | | | |
| EMAIL: | | | | EMAIL: | | | | | | |
| OCCUPATION: | | | | OCCUPATION: | | | | | | |
| WORK ADDRESS: | | | | WORK ADDRESS: | | | | | | |
| WORK PHONE NO: | | | | WORK PHONE NO: | | | | | | |

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| SISTER IN HOLLYPARK GNS | NAME: | CLASS: | TEACHER: |
| BROTHER IN HOLLYPARK BNS | NAME: | CLASS: | TEACHER: |
| SISTER WHO IS A PAST PUPIL | NAME: | YEARS ATTENDED: |  |
| EITHER PARENT WHO IS A PAST PUPIL | NAME: | YEARS ATTENDED: |  |

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| Class applying for: | | | | | | |
| SI | 1st | 2nd | 3rd | 4th | 5th | 6th |
| PREVIOUS SCHOOL: | | | | | | |
| **Please include recent school reports with this application** | | | | | | |

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| MEDICAL HISTORY (e.g. asthma, allergies, any special needs etc) |
| OTHER RELEVANT INFORMATION |

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| **ALTERNATIVE CONTACT DETAILS** | | | |
| In the case of **illness or accident or emergency school closure** parents/guardians will be contacted. If you are unavailable we will contact the persons listed below: | | | |
| Name | Relationship to Child (must be over 16 years of age) | Address | Phone |
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| **School Policies**  I/We agree on behalf of my/our child to sign up to the school’s policies (available to read on school website [www.hollyparkgns.ie](http://www.hollyparkgns.ie)) including but not limited to:   * Code of Behaviour * Mobile Phone and Related Devices Policy * Anti-Bullying Policy | |
| **Signature of parent/guardian:** | **Signature of parent/guardian:** |
| **Date:** | **Date:** |

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| It is the responsibility of the parents/guardians to ensure that all information is correct at the time of application. Please check all information is correct before submitting. |

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| **Signature of parent/guardian:** | **Signature of parent/guardian:** |
| **Date:** | **Date:** |

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| **For Office Use Only:**  Date Application Form received: \_\_\_\_\_\_\_\_\_\_\_\_\_  Recent School reports received: Yes No  Upon offer of place **original** Birth/Adoption Certificate received: Yes No |

**Incomplete application forms will not be considered.**

**Please note the offer of a place does not guarantee that any siblings will be offered a place.**

**We will only retain personal information for as long as it is necessary to fulfil the purposes the**

**information was collected for, including any legal, accounting or reporting requirements. Please see the school website (**[**www.hollyparkgns.ie**](http://www.hollyparkgns.ie)**) for our Data Protection Privacy Statement for Parents, Guardians and Pupils**