

1st Year 2020

Date:

Enrolment Form

Do you want a place in 1st Year 2nd 3rd
4th 5th 6th LCA
(Please tick appropriate box)

Place for year: 2020

Surname: _____ PPS Number: _____

Christian name: _____ Telephone No: _____

Address: _____

Email Address: _____

Date of Birth: _____ Age: _____ Nationality: _____

Fathers Name: _____ Mothers Name: _____

Mobile No: _____ Mobile No: _____

No of Children in Family: _____ Mother Maiden Name: _____

School

Previous Schools Attended: _____

Name of Principal: _____

School Roll Number: _____

Please detail any health problems that your son may have that the school should be aware of:

*Please note that the closing date for Enrolment for 1st year 2019 is 28th May 2018.
Admission Fee of €50 must be paid on enrolment.

Consent Form

Does your child have a psychological report? Yes/No.
If yes please sign below so that the primary school can forward the report to St. John's College.

Parents' Signature: _____

The school requests your permission to photograph/record your son while at class events or on school trips.

Parents' Signature: _____

Consent for Sensitive Personal Data for the School's October Return to the Department of Education & Skills

Do you or your child have a medical card? Yes No
(Please circle the appropriate answer)

Please sign below giving us permission to forward this information to the Department of Education & Science.

Signed: _____
Parent/Guardian.