

Newbridge Educate Together National School



Pre-enrolment Application Form

INFORMATION ON CHILD TO BE ENROLLED

Child's full name: _____
Date of Birth: _____
PPS number: _____
Year for which child is being pre-enrolled: _____
Class for which child is being pre-enrolled: _____
Current/Previous School: _____ (if applicable)
Current/Previous School Address: _____

PARENT/GUARDIAN INFORMATION

Name(s): _____
Contact Address: _____
Phone Numbers: _____
Email (if applicable): _____

For Newbridge Educate Together use only

Date of Receipt of form: _____ Number: _____
Signed by: _____ Year: _____

Please tick here if you do not want to receive further information

Receipt

- I understand that allocation of places in the school will strictly follow our admissions policy
- I understand that the receipt of a pre-enrolment form does not guarantee that the child will be offered a place
- I understand that it is my responsibility to inform the school of any change of address, telephone number or other relevant circumstances
- I understand that if I have not replied in writing to a confirmed offer of a place for my child within the specified date of that offer being made I will have forfeited my child's place on the pre-enrolment list
- I understand that the above information may be shared with other principals when places are being offered
- A copy of Newbridge Educate Together's admissions policy may be obtained from the school at 045 480597

Signed: _____ Date : _____

Email: netns@eircom.net

Príomhoide: Eimear Carey

Tel/Fax: 045 480597