

**St. Bernadette's Senior National School, Quarryvale, Clondalkin, Dublin 22.**

**APPLICATION FOR ADMISSION OF NEW PUPILS : YEAR 2011 / 2012.**

NAME OF CHILD : \_\_\_\_\_

NATIONALITY : \_\_\_\_\_

DATE OF BIRTH : \_\_\_\_\_ P.P.S. No : \_\_\_\_\_

FATHER'S NAME : \_\_\_\_\_

MOTHER'S NAME : \_\_\_\_\_

SISTER(S)/BROTHER(S) IN THIS SCHOOL \_\_\_\_\_

NUMBER OF CHILDREN IN FAMILY : \_\_\_\_\_

HOME ADDRESS : \_\_\_\_\_

TELEPHONE No.: HOME \_\_\_\_\_ WORK \_\_\_\_\_ MOBILE \_\_\_\_\_

(If not available - another contact): Name: \_\_\_\_\_ No: \_\_\_\_\_

RELIGIOUS DENOMINATION : \_\_\_\_\_

PARENTS/GUARDIANS OCCUPATIONS : \_\_\_\_\_

PREVIOUS SCHOOL/S ATTENDED : \_\_\_\_\_ CLASS : \_\_\_\_\_

OTHER THAN ST. BERNADETTE'S JUNIOR N.S.

ARRANGEMENTS TO BE MADE IF  
THE CHILD IS ILL IN SCHOOL : \_\_\_\_\_

NAME OF FAMILY DOCTOR : \_\_\_\_\_

DO YOU GIVE PERMISSION TO TAKE THE CHILD STRAIGHT TO  
HOSPITAL IN CASE OF SERIOUS ILLNESS / ACCIDENT ? YES \_\_\_\_ No \_\_\_\_

DO YOU HOLD A MEDICAL CARD? YES \_\_\_\_ No \_\_\_\_

DOES ANY LEGAL ORDER UNDER FAMILY LAW EXIST  
THAT THE SCHOOL SHOULD KNOW ABOUT ? YES \_\_\_\_ No \_\_\_\_

IF NECESSARY, DO YOU GIVE PERMISSION FOR YOUR  
CHILD TO RECEIVE RESOURCE TEACHING ? YES \_\_\_\_ No \_\_\_\_

**Any Other Useful Information**

For instance, list any problems the child may have in relation to health, (allergies, epilepsy, asthma, sight, hearing, grommets, speech, fainting etc.)

The school should be made aware of any court order which affects the child's welfare and also the name of any person into whose custody the child should not be given.

\_\_\_\_\_  
\_\_\_\_\_

Please complete and **return to the school before 4th May '11**

I \_\_\_\_\_ HAVE READ THE RULES OF THE  
SCHOOL AND ACCEPT THAT MY CHILD \_\_\_\_\_ WILL ABIDE BY  
THEM.

UNSIGNED APPLICATIONS WILL NOT BE ACCEPTED.

SIGNED : \_\_\_\_\_ PARENT/GUARDIAN DATE : \_\_\_\_\_