

St. Patrick's Junior School

TENNIS COURT LANE, SKERRIES, CO. DUBLIN.

K34 D799

Principal: Máire Ní Chróinín Deputy Principal: Lynsey Dungan

Name & Surname of pupil (as on birth cert/certificate of adoption)

Roll Number: 16333Q RCN: 20118839

2025/26 ENROLMENT APPLICATION FORM - AUTISM CLASS

<u>Children will be enrolled in the order set out in the school's Admissions Policy, available on the school website.</u>

Please note: Completion of this form <u>does not guarantee</u> your child a place in the school.

Please Use Block Capitals.

Address:				
Eircode:	PPSN:			
Date of Birth:	Gender: M	F	=	
Language(s) spoken at home:				
Nationality (if dual, please specify both):				
Child's religion (if applicable):	Mother's birth surname (if ap	plicable)		
Parent 1 name & surname:	Parent 2 name & surname:			
Parent 1 address:	Parent 2 address:			
Parent 1 email:	Parent 2 email:			
Parent 1 phone:	Parent 2 phone:			
List any siblings attending St. Patrick's JNS or SNS, and their class level.				
Pre-school(s) previously attended & length of time enrolled there:				
Primary school(s) previously attended & length of time enrolled there:				
Fillinary school(s) previously attended & length of time emotied there.				
Mainstream class level(s) attended: (circle thos	se attended): N/A JI	SI	1 st	2 nd
Please list all assessments carried out, or awaited:				
Trease tecture accessiments carried out, or arranted.				
(all such assessment reports should be submitted with this application in line with the school's				
admissions policy.)				
Please list any medical conditions, allergies or special medical needs:				
Family Doctor/Medical practice:				
Copy of birth cert Yes No	Copy of Baptismal Cert	Yes	No	N/A
Proof of address 1: Yes No	Proof of address 2:	Yes	No	

Please note: only completed applications (all questions answered and all required documentation presented) will be considered for a place.



