Under the Patronage of the Church of Ireland Archbishop of Dublin
 and Bishop of Glendalough

***St. Laurence’s National School***

***Martin’s Row***

***Chapelizod***

***Dublin 20***

***Ph. 086 0205494***

***Email: info@stlaurenceschapelizod.com***

***Website: stlaurenceschapelizod.com***

***School Roll no.: 10653E***

Rev Ruth Noble Karen Smart Martin Rossiter

Chairperson, Board of Management Principal Deputy Principal

**NOTIFICATION OF INTENTION TO APPLY FOR**

**ENROLMENT FORM**

Please use capitals. All sections must be completed.

# Details of Child

|  |  |
| --- | --- |
| Surname:   |   |
| First names:   |   |
| Date of Birth:   | Gender:  Male  Female   |

# Details of Parents/Guardians

|  |  |
| --- | --- |
| Name and Surname:   | Name and Surname:  |
| Address:    | Address:   |
| Mobile No:  | Mobile No:   |
| Work Phone No:  | Work Phone No:   |
| Home Phone No:  | Home Phone No:   |
| Email:   | Email:  |

Page 1 of 2

# Signature of Parents/Guardians

This is not application form and does not form part of the selection process. The school will make a record of parents/guardians wishing to enrol their child/children for no other purposes than being in a position to post out application forms at the appropriate time.

I/We wish to give notice of our intention to apply for our enrolment in respect of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (applicant pupil) to St Laurence’s National School for term (month) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the school year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in accordance with the foregoing information and request that an application form be sent to me/us at the appropriate time.

I/We understand that this notification places the applicant pupil on a list of those requiring enrolment application forms for the stated term and year. I/We understand that this notification does not offer any preferment to the applicant pupil and does not guarantee any place for him/her either for the term and year requested or for any other term or year.

I/We understand that it is my/our responsibility to communicate to the school any change in my/our contact details.

I/We confirm that all the information entered on this form is fully correct to my/our knowledge.

Signature of parent/guardian(1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Signature of parent/guardian(2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

In line with good practice, all documentation relating to enrolment forms are kept in manual files which are locked in the filing cabinet each day. All documentation relating to your child’s application will remain confidential to the Applications’ Committee who act on behalf of the Board of Management.

Page 2 of 2