| Child's First Name | Child's Surname | Child's Middle Name | Gender |
|----------------------------------|------------------------------------|-----------------------------------------------|-----------------|
| | | | |
| PPS Number | Date of Birth | Nationality | |
| | | | |
| Extra Information | | Medical and Allergy Information | |
| Doctor and Doctor Contact Number | | Please attach any extra documentation | n required |
| | | 2023-1 | |
| Home Phone Number | Mobile (Text) Number | Alternative Home Phone Number(s) | Home Address |
| | 1 Ne | | |
| Did this child attend a Naíonra? | Did this child attend a preschool? | Did this child attend another primary school? | |
| | | | |
| Parent 1 First Name | Parent 1 Last Name | Parent 1 E-mail | Parent 1 Mobile |
| | <u> </u> | | |
| Parent 1 Work Number | Parent 2 First Name | Parent 2 Last Name | Parent 2 E-mail |
| | | | |
| Parent 2 Mobile | Parent 2 Work Number | | |
| | | | |

Having read the Enrolment Policy, please tick the box that applies to your child

| a. My child will be at least 4 years old before the 1st of April 2023 and I have provided proof of this in the form of a birth certificate | |
|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| accompanying this application. | |
| b. My child has a sibling who is/was a pupil of the school | |
| c. My child's parent is a member of staff | |
| d. My child has attained a level of fluency in Irish which would be expected if the language was spoken at home as a regular means of | |
| communication in a non-educational environment, taking the age and any extra educational needs of the child into account and it is | |
| likely that my child's fluency will regress unless they are given a place in this Irish medium school. | |
| Where a parent wishes their child to be considered as a child how has achieved a Vevel of fluency in the Irish language', the parent must provide | |
| evidence to prove/display the fluency to the Board of Management's representatives. This evidence must be provided with the application; except | |
| for evidence provided by attending a meeting at the school, if such is requested by the parents/guardians. Please tick here if you wish to have a | |
| meeting arranged. | |
| e. My child is in the "Other Applicants" category | |

The school's Privacy Notice is available on www.gaelscoiloilibheir.ie. I confirm that what I have written above is true. I have read and I understand the **Enrolment Policy for September 2023.**

Signed: Parent/Guardian 1: ______ Parent/Guardian 2: _____

Date: