## **Mount Sion Primary School**

## An Edmund Rice School

Barrack Street, Waterford City

Roll No: 19947U Phone: 051-377947

Email: office@mountsionprimaryschool.ie



## APPLICATION FORM FOR ADMISSION TO MOUNT SION PRIMARY SCHOOL

(PRIVATE AND CONFIDENTIAL)

Mount Sion Primary School is entitled to be supplied with all relevant information. All information given must be true and accurate and will be treated in a strictly confidential manner. False or misleading information will lead to disqualification of the application.

<u>PUP</u>	IL'S DETAILS	
Child	's First Name:	Child's Surname:
Child	's Date of Birth:	Child's PPS No:
Child	's Main Address (this address will be used for corre	espondence on application process and must be current):
Relig	ion: Please state religion if any	
<u>DET</u>	AILS of PARENTS/GUARDIANS	
1.	Full Name:	
	Plea	se state relationship to applicant.
	Contact details of parent/guardian at 1. Above:	Phone:
		Email:
2.	Full Name:	
	Plea	se state relationship to applicant.
	Contact details of parent/guardian at 2. Above:	Phone:
		Email:
Pleas	e answer the following questions as the informat	tion offered may be used to determine the allocation of
place	s in the event of oversubscription:	
1.	Does the applicant have a brother currently enroll	ed in Mount Sion Primary School? <b>Yes</b> No
	If <b>Yes</b> , please state brother's name and class:	
	Brother's name:	Brother's name:
	Class:	Class:

(Please insert child's name) I/We hereby confirm in writing that the code of behaviour of the school is acceptable to me/us and that I/We will make all reasonable efforts to
If <b>Yes</b> , please state brother's name:  Years of attendance:  Year
4. Is the applicant a son of a past pupil?  5. If <b>Yes</b> , please state father's name:  Years of attendance:
4. Is the applicant a son of a past pupil? Yes No Solution 1. If Yes, please state father's name: Years of attendance: Years of Attenda
5. If <b>Yes</b> , please state father's name:
In accordance with section 23(4) of the Education (Welfare) Act 2000, as parent/guardian of the applicant (Please insert child's name) I/We hereby confirm in writing that the code of behaviour of the school is acceptable to me/us and that I/We will make all reasonable efforts to ensure compliance with this code by (Please insert child's name).  By signing this application I am also certifying that I am legally entitled to apply for a place for my child
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Signature of parent/guardian:
1 Date:
2 Date:
The following documentation must be provided:
Please include: Copy of Birth Certificate
Copy of Baptismal Certificate (if applicable)
Copy of Passport for boys born outside of Ireland (if applicable)
For office use only:
Date application received:
Processed by:
Documents provided: Birth Certificate Baptismal Certificate (where applicable)
Passport (where applicable)
i assport (where applicable)
Decision: Place offered Yes No Date:
Decision. Trace officieu 163