

APPLICATION FOR ENROLMENT FORM - Junior Infants 2024

Surname	First (names)
Date of birth	Requested class and date of entry
Postal Address & Eircode	

PARENTS' DETAILS

Parent's full name	Parent's full name
Postal Address & Eircode	Postal address & Eircode
Email address	Email address
Telephone number	Telephone number

Religious denomination (where applicable)

I/We confirm that the applicant student is a member of the above named minority religious denomination. We support the ethos of this Church of Ireland school and wish for our child to be educated in a school that provides a programme of religious education which is the same or has a similar ethos to the minority religion named above.

CONFIRMATION OF MEMBERSHIP OF MINORITY RELIGION

I confirm that	_ (enter applicant student's name) is a
member of	_(enter name of Church and/or Parish)
Signed:	-
Position held (i.e. Rector, Curate, Priest, Pastor etc.)	_
Stamp:	
DECLARATION	
I/We wish to apply to the Board of Management o	f Rathfarnham Parish N.S. to have
I/We wish to apply to the Board of Management o	f Rathfarnham Parish N.S. to have
I/We wish to apply to the Board of Management o	
I/We wish to apply to the Board of Management o	's name) enrolled in the school on
I/We wish to apply to the Board of Management of the student and the student a	ment application does not guarantee
I/We wish to apply to the Board of Management of applicant student (applicant student) [//// (date)] I/We understand that the completion of this enroll a place in the school. I/We have received read and accept the School Ru	ment application does not guarantee tles, Code of Behaviour and Enrolment the ethos of the school.
I/We wish to apply to the Board of Management of the student applicant student (date) I/We understand that the completion of this enroll a place in the school. I/We have received read and accept the School Ruppolicy. We will co-operate with staff and support to	ment application does not guarantee tles, Code of Behaviour and Enrolment the ethos of the school. is correct and accurate.
I/We wish to apply to the Board of Management of applicant student (applicant student) I/We understand that the completion of this enroll a place in the school. I/We have received read and accept the School Ruppolicy. We will co-operate with staff and support to I/We confirm that all the information on this form	ment application does not guarantee les, Code of Behaviour and Enrolment the ethos of the school. is correct and accurate. Parent's signature) Date:

THIS APPLICATION FORM MUST BE ACCOMPANIED BY:

- A copy of the applicant student's birth certificate
- Proof of address in the form of a utility bill in the applicant's name which must be dated no later than three months prior to the closing date.