

**Enrolment application form**

**St. Peter Apostle Junior National School**

**Roll: 19569O**

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| **Pupil details** | |
| **Pupil’s name:** | |
| **Male/Female:** | **Class being applied for:** |
| **Date of birth:**  ***Please provide the Birth Certificate for your child*** | **PPS number:** |
| **Address:**  ***Please provide proof of address (Utility bill, Government documentation etc.)*** | |

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| **Section 2: Parents/Caregivers’ details** | |
| **Name:** | **Name:** |
| **Relationship to the child:** | **Relationship to the child:** |
| **Phone number (Mobile:)** | **Phone number (Mobile):** |
| **Phone number (Home):** | **Phone number (Home):** |
| **Email Address:** | **Email Address:** |

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| **Section 3: Additional local contact names, to be contacted in emergencies. Not to be those of parent/guardian** | |
| **Name:** | **Phone No:** |
| **Relationship to child:** | |
| **Name:** | **Phone No:** |
| **Relationship to child:** | |
| **Name:** | **Phone No:** |
| **Relationship to child:** | |
| **Name:** | **Phone No:** |
| **Relationship to child:** | |

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| **Section 4: Details pertaining to siblings in the school** |
| **Please list the name and age of siblings attending either St. Peter Apostle JNS or St. Peter Apostle SNS**   |  |  | | --- | --- | | **Name** | **Age** | | **1.** |  | | **2.** |  | | **3.** |  | | **4.** |  | | **5.** |  | | **6.** |  | |

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| **Section 4: Butterfly Suite** | |
| **If applying to our ASD classes – please read all the following information carefully**  **A report must accompany all applications for our ASD classes**  Parents applying to our Early Intervention class must have a report stating that your child has a diagnosis of ASD.  Where applications are to the ASD **Junior/Senior classes (not Early Intervention)** there must be an **updated** report stating that in addition to having a diagnosis of ASD, a special class setting is recommended setting for your child. In order to meet Departmental Guidelines, there must **only** be a **single** recommendation for a special class i.e. the report should **not** have a recommendation for mainstream with an SNA, followed by a recommendation for a special class followed by recommendation for a special school. The reason for this is that where multiple recommendations are given, a school is required to go with the most inclusive option.  **Please ensure:**  **You read the Admissions Notice (available online, or from the school office) so you are informed as to the number of places available at each class level (indicated again below)**  **You read the school’s Admission policy (available online or from the school office) so you are informed as to the processes that govern eligibility and how places are allocated.** | |
| **Please tick which class level you are applying for.**  **Please note where 0 places are available you may apply to go on a waiting list** | |
| **Early Intervention Year 1**  Must be aged between 3 years, 0 months and 4 years, 2 months by the first day of school **2024**  **3 places available in this class next year** |  |
| **Early Intervention Year 2**  Must be aged between 4 years, 3 months and 5 years, 2 months by the first day of school **2024**  **0 places available in this class next year** |  |
| **ASD Junior Year 1** (Junior Infants)  Must be no older than 6 years, 2 months on the first day of school 2024  **3 places available in this class next year** |  |
| **ASD Junior Year 2** (Senior infants)  Must be no older than 7 years, 2 months on the first day of school 2024  **0 places available in this class next year** |  |
| **ASD Senior Year 1** (First Class)  Must be no older than 8 years, 2 months on the first day of school 2024  **0 places available in this class next year** |  |
| **ASD Senior Year 2** (Second Class)  Must be no older than 8 years, 2 months on the first day of school 2024  **0 places available in this class next year** |  |

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| **Section 5: Optional – Additional information** |
| **If there is any additional information that you wish to share at this point, please detail it here.** |

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| **Section 6: Checklist for all applications** | | |
| **Please Tick** | **Yes** | **No** |
| **Have you attached a copy of your child’s Birth Certificate?** |  |  |
| **Have you filled in your child’s PPS Number?** |  |  |
| **Have you attached Proof of Address?** |  |  |
| **Have you attached your child’s report (Butterfly suite applications only)** |  |  |
| **Have you read the school’s admissions notice and are aware of the number of places available for the class to which you are applying?** |  |  |
| **Have you read the school’s Admission Policy and are informed as to the processes that govern eligibility to our different classes and how places are allocated?** |  |  |
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