

Church of Ireland - Diocese of Dublin
ST ANDREW'S NS LUCAN

St Edmundsbury Lucan Road Lucan Co. Dublin

Telephone: 01-6280975

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Website: www.standrrewsntlucan.ie

Patron: The Archbishop of Dublin

Principal: Mr. Padraic Byrne

Chairperson of the Board of Management: Mr. Robert Grier

APPLICATION FORM JUNIOR INFANTS 2024

(PLEASE ENSURE THAT ALL SECTIONS ARE COMPLETED IN FULL USING CLEARLY WRITTEN BLOCK CAPITALS)

PROPOSED DATE OF ENTRY: _____

CHILD'S FULL NAME: Fore Name _____ Surname _____

CHILD'S DATE OF BIRTH: _____ CHILD'S PPSN _____

FATHER'S NAME: _____

FATHER'S ADDRESS: _____

FATHER'S MOBILE NUMBER: _____

FATHER'S EMAIL: _____

HOME CONTACT NUMBER: _____

MOTHER'S NAME: _____

MOTHER'S ADDRESS: _____

MOTHER'S MOBILE NUMBER: _____

MOTHER'S EMAIL: _____

EMERGENCY CONTACT NUMBER: NAME: _____ NUMBER _____

PREVIOUS SCHOOL ATTENDED BY CHILD (if any): _____

ADDRESS OF SUCH PREVIOUS SCHOOL: _____

OTHER SCHOOLS APPLIED FOR: _____

WHERE DOES OUR SCHOOL STAND IN YOUR ORDER OF PREFERENCE? _____

RELIGION OF CHILD: _____

(P.T.O.)>

IS YOUR CHILD A MEMBER OF A MINORITY RELIGION? _____

If your child is a member of a minority Church please complete Section B

SECTION B :
NAME OF CHURCH ATTENDED:
ADDRESS OF CHURCH ATTENDED:

Do you agree that successful applicants who receive a place in St Andrews National School Lucan will be educated in a school that provides a programme of religious instruction/education which is the same or has a similar ethos to the religious ethos of the minority Religion of the applicant student.

YES/NO

Please ask your priest/minister/pastor to complete this section:

I certify that _____

*is a member of _____
Parish/Congregation.*

(Completion of this section is not necessary, except for Church of Ireland children who are given preference)

Signed: _____

Name in block capitals: _____

Position held: _____

Please provide Church stamp and/or provide a copy of the child's Baptismal Certificate.

- 1. I confirm my child/ren is/are a member of a Minority Religion. Please tick:_____**
- 2. I consent to my child/ren following the R.E. programme and attendance at all religious ceremonies for St Andrew's National School Lucan. Please tick:_____**

When the form has been completed please sign and date below:

I confirm that the above details are true and accurate. Failure to declare any change in circumstances may result in forfeit of your school place.

SIGNATURE OF PARENT OR GUARDIAN: _____

DATE: _____

PLEASE READ THESE NOTES CAREFULLY:

- Unless every relevant section of the form is completed in full and necessary documentation provided, it may not be processed.
- The completion of this form **does not** guarantee a place in the school.
- Available places are allocated in December/January each year by the Board of Management.
- If a waiting list is drawn up, it does not automatically carry forward to the following year in the case of a child who does not get a place.

For office use only:

Registration date:

Birth Certificate Received:

Baptism Certificate/Letter received:
