

Howth Road Mixed National School

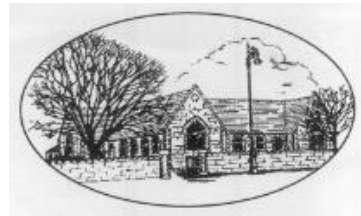
Clontarf Road, Clontarf, Dublin 3



Tel. 01 833 5124

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Website: www.howthroadns.ie

Application Form Sept. 2019



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|---|---|
| <p>Pupil's name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>_____ Postal Code _____</p> <p>Please complete this form for each child (if twins)...</p> | <p>* NOTE: Date of Birth ____ / ____ / ____ Date Month Year</p> <p>*A copy of the Birth Certificate must be included with this form</p> <p>Male / Female   Choose one</p> <p>Nationality _____</p> <p>**Religion _____</p> <p>**Only required for qualification for category 1 ONLY! (Refer to Admission for Enrolment Policy)</p> |
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Contact details

Parent / Guardian: _____

Parent / Guardian: _____

Phone No: _____

Phone No: _____

Relationship to child: _____
Mother / Father / Guardian

Relationship to child: _____
Mother / Father / Guardian

Contact email address: _____

Should my child _____ be offered a place in Howth Road Mixed National School

I declare that:

I agree to the school's Code of Behaviour

I agree to the school's Anti-Bullying Policy

I agree to the school's Ethos statement (found in Code of Behaviour Policy)

I enclose a copy of my child's birth certificate

Parent / Guardian 1 _____ Dated: _____

Parent / Guardian 2 _____ Dated: _____

Note: only for category 1 (refer to our enrolment policy)

Church Membership Declaration must be included with this form (Catg. 1 only)

I enclose:

Declaration of Church Member (see overleaf)

Statement requesting education under the Presbyterian Ethos of the school

(Your own letter)

Category 1 only - Declaration of Church Membership overleaf (if needed)

**** (Under Religion)**

Applies to qualification for Category 1 only of enrolment policy (all other categories do not need one of the below):-


- Get this completed by the Minister of your Church Community: -



Declaration of Church Membership

Name of Child:- _____

Parent (s) or Guardian (s) Name(s) _____


Address  _____

I hereby declare, having read the School Admissions & Enrolment Policy (for the purposes of school enrolment), that the above named child is a member of our church community.

Signature of Minister _____

Date _____

Name and address of Church  _____

Contact Phone No.  _____

PLEASE NOTE: The above Information may be verified.