



ST. THOMAS' JUNIOR NATIONAL SCHOOL

Esker, Lucan, Co. Dublin.
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Roll No.: 19542r



PRE-ENROLMENT FORM

Enrolment for school year _____ **Date of Enrolment** _____

Child's Name: _____ Male or Female _____

Date of Birth: _____ **Child's P.P.S. No.** _____ Religion _____

Home Address: _____

Family Nationality _____ Child's Country of Birth: _____
(Country of Origin)

Home Ph. No. _____ Mobile No. _____ email address _____

Medical Condition: (if any) _____

Day Care/Creche _____ Montessori/Nursery _____

Primary School attended (if any) _____

Class: _____

Mother's Name _____ Mother's Occupation _____ Work No. _____

Father's Name _____ Fathers Occupation _____ Work No. _____

Any reports or additional information, which may be helpful to us regarding your child:

Birth Cert. Yes [] No [] Baptismal Cert. Yes [] No [] Utility Bill Yes [] No []

Brother/Sister presently in St. Thomas' or St. Anne's, Yes [] No [] Class: _____

Name: _____ Teacher: _____ Room No. _____

- I understand that the completion of a pre-enrolment form does not guarantee that the child will be offered a place.
- I understand that I have to present at the school for formal registration of my child in **January** of the year they are due to start school.
- I understand that it is my responsibility to inform the Board of Management of any change of address, telephone number or other relevant circumstances.
- I understand that if I have not replied to a confirmed offer of a place for my child within 14 days of that offer being made I will have forfeited my child's place on the pre-enrolment list.

Signed _____ **Date** _____