**Office Use Only:** Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**St. Louis Primary School**

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**William’s Park**

**Rathmines**

**D06 FD92**

**JUNIOR INFANTS APPLICATION FORM – SCHOOL YEAR 2026-2027**

***Please email your application and supporting documentation to*** **BRowley@stlouis.ie**

**CHILD’S NAME** ……………………………………………............................ Male Female

 *(Use BLOCK LETTERS and as written on Birth Certificate)*

**GIVEN NAME (if applicable)…………………………………………………………………….**

**Date of Birth: ……………………………. Age at school entry: Yrs.………/ Mths…..…**

**Child’s PPS Number: ……………………**

**HOME ADDDRESS: …..……………………………………………………………………………………………………………...**

**……………………………………………………………………………………………………………………………….**

**EIRCODE: …………………………………………….**

**Nationality: …………..…................ Country of Birth: ………………………………..**

**If not born in Ireland, date child arrived in Ireland**: ………………………………………..

**First Language of home: …………………….. Second Language of home:…………………………**

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**Has your child attended Playschool and/or Montessori? Yes No**

**Name of Playschool: ………………………………………………………….. Dates:………………………………......**

**Name of Previous School & Class** (ifapplicable): ……………………………………………………………………

**Full Postal address of Playschool (or school if applicable) :…………………………………………………………….**

**………………………………………………………………………………………………………………………………………**

**Telephone No: ……………………………………….. Manager/Principal: ………………………………………………**

*I/We give permission**to discuss the needs of my child with the Management/Principal of the pre-school/school listed above*

***Signature:***………………………………………………. ***Date:*** ……………………………………………………………….

**Place in Family: ………………………………… Number of Children in Family: …………………………..**

**Siblings attending St. Louis Primary School:**

***Name(s) ………………………………………………………………………………………………………………….***

***Class(es)………………………………………………………………………………………………………………….***

**Parent 1/ Guardian 1** **Parent 2 / Guardian 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** |  |  | **Name** |  |
| **Mobile No.** |  |  | **Mobile No.** |  |
| **Email Address** |  |  | **Email Address** |  |
| **Alternative** **Contact No.** |  |  | **Alternative** **Contact No.** |  |

**Is Parent a Past Pupil? Yes / No**

**If Yes: - Parent 1/ Guardian 1 Parent 2/ Guardian 2**

**Years of attendance: …….......... Years of attendance: …………….**

**Who does the child reside with? Parent 1 🞎 Parent 2 🞎 Both 🞎 Other 🞎**

**Who is the Legal Guardian(s)? Parent 1 🞎 Parent 2 🞎 Both 🞎 Other 🞎**

**If OTHER please give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Any other useful information you would like the school to have regarding your child**:

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**Data Privacy Statement**

The information provided on this form will be used by **St. Louis Primary School** to apply the selection criteria for enrolment in Junior Infants, and to allocate school places in accordance with the School’s Admission Policy and the School’s Annual Admission Notice.

Where a pupil is admitted to the school, the information will be retained on the pupil’s file.

On acceptance of an offer of admission, this information will be entered in the School Administration System (Aladdin), and will be uploaded to the Primary Online Database. The Primary Online Database (POD) is a nationwide individualised database of primary school pupils, hosted by the Department of Education.

**Parental/Guardian Declaration – please read carefully and sign below**

* I have read the Data Privacy Statement in relation to the processing of information in relation to my child.
* I understand that this application for admission to St. Louis Primary School is subject to the Admissions Policy in place (available on www.stlouis.ie).
* I understand that completion of this application form does not constitute acceptance of the pupil by the school authorities, nor does it imply obligation on the part of the parent//guardian.
* I understand that the Admissions Policy that is in existence when an offer of a school place is being made will be the policy that will be applied to the application. This policy is available on [www.stlouis.ie](http://www.stlouis.ie)
* I confirm that all the information supplied by me in respect of my child’s Junior Infants application form is accurate.
* I certify that my child’s home address in respect of this application is a true and valid address.

**I/We wish to enrol my child …………………………………………………………………….. (Name)**

**I/We declare that the above information to be correct and understand that it will be treated as confidential.**

**…………………………………………………… …………………………………………**

**Signature of Parent(s) / Guardian(s) Date of Application**

We thank you for taking the time to complete this Application Form. The following documentation must accompany all **2026/2027** application forms - it is the responsibility of the applicant to provide all necessary documents requested otherwise there may be a delay in processing your application beyond the closing date.

***Please email your application and supporting documentation to*** **BRowley@stlouis.ie**

**Checklist**

**Copy of Birth/Adoption Certificate**

**Copy of 2 Utility Bills**

***In parent’s/ guardian’s name, dated in the previous 3 months***

***If your child is accepted for admission in St. Louis Primary School, an Acceptance of Admissions Form will be forwarded for completion by parent/guardian following your acceptance of a Junior Infant school place for 2026/2027.***