



## PRE-ENROLMENT APPLICATION FORM

Please complete and return to the school for the attention of the Pre-Enrolment Co-ordinator, enclosing a **STAMPED ADDRESSED ENVELOPE** for acknowledgment.

**Please write clearly in block capitals.**

CHILD'S SURNAME : \_\_\_\_\_

SEX : M \_\_\_\_\_ F \_\_\_\_\_

CHILD'S FIRST NAME: \_\_\_\_\_

DATE OF BIRTH : ( dd/mm/yy) \_\_\_\_\_

NAMES OF PARENTS / GUARDIANS

CONTACT NUMBERS (IF AVAILABLE)

Mother : \_\_\_\_\_

**Telephone**

(Home): \_\_\_\_\_

Father: \_\_\_\_\_

(Mobile): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are applying for a place in a class **other than Junior Infants** please indicate class \_\_\_\_\_

Name of school in which child is currently enrolled : \_\_\_\_\_

We are aware of the school's enrolment policy available at [www.metns.ie](http://www.metns.ie), or on request from the school office

Signed \_\_\_\_\_ Parent / Guardian

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FOR SCHOOL USE ONLY

PEL Application Date: \_\_\_\_\_  
(Date PEL form received)

PIN NUMBER: \_\_\_\_\_  
(Personal identification number)

ACKNOWLEDGED: \_\_\_\_\_