

St. Mary's Parish Primary School

Bryanstown, Drogheda, Co. Louth, A92 XD80.

Telephone: 041-9845374 • Email: office@smpps.ie • Web: www.smpps.ie



APPLICATION FORM [SENIOR INFANTS-6TH CLASS] 2024/2025

PLEASE NOTE: FALSE INFORMATION WILL AUTOMATICALLY DISQUALIFY APPLICANTS

CLASS Requested:

Term:

PLEASE READ SCHOOL ADMISSIONS POLICY / ADMISSIONS STATEMENT AVAILABLE ON SCHOOL WEBSITE WWW.SMPPS.IE OR FROM SCHOOL OFFICE

PLEASE FILL OUT DETAILS IN BLOCK CAPITALS

CHILD'S FIRST NAME: (AS ON BIRTH CERT)

CHILD'S SURNAME: (AS ON BIRTH CERT)

MALE: FEMALE: DATE OF BIRTH:

HOME ADDRESS:

..... EIRCODE:

PPSN No: NATIONALITY:

LANGUAGES SPOKEN AT HOME:

PREVIOUS SCHOOL:

MOTHER'S NAME: MOTHER'S MAIDEN NAME:

MOTHER'S MOBILE MOTHER'S EMAIL:-

FATHER'S NAME : FATHER'S MOBILE:

FATHER'S EMAIL ADDRESS:

HAVE YOU OTHER SONS OR DAUGHTERS IN THE SCHOOL: YES NO

NAME & CLASS OF BROTHER OR SISTER IN SCHOOL:

EMERGENCY NAME & CONTACT NO.: (1) (Not parents) [RELATIONSHIP TO CHILD, E.G. MINDER]

EMERGENCY NAME & CONTACT NO.: (2) (Not parents) [RELATIONSHIP TO CHILD, E.G. MINDER]

PLEASE NOTE YOU MUST ATTACH THE FOLLOWING:- **REPORT CARD** **BIRTH CERTIFICATE**

RECENT UTILITY BILLS (x2) [e.g. Gas, Electricity, Telephone, Car/Home Insurance Policy, Official Government Documents, Social Insurance Document, etc.]

Signature: _____ Signature: _____ Date: _____
[Parent/Guardian] [Parent/Guardian]