

Roll No: 17957N

Tel No: 065-6829808

Email: office@hfjs.ie

Website: holyfamilyjuniorschool.com

Principal: Miriam Lowe

Deputy Principal: Marina Mulqueen



Holy Family JNS

Station Road

Ennis

Co. Clare

V95 YR79

Enrolment Application Form

The purpose of this form is to apply to enrol your child in Holy Family Junior School. **Please consult Holy Family Junior School Admission Policy, on our school website for details on the enrolment criteria, procedure and enrolment decision making.** This is an expression of interest form only. A full enrolment registration form will be required prior to enrolment.

| | |
|--|--|
| Child's Surname (as per Birth Certificate) | |
| Child's First Name: | |
| Gender: | |
| Date of Birth: | |
| PPS Number: | |
| Nationality: | |
| Address (with Eircode) | |

| Parent/Guardian 1 | |
|-------------------|--|
| First Name: | |
| Surname: | |
| Mobile Number: | |
| Email Address: | |

| Parent/Guardian 2 | |
|-------------------|--|
| First Name: | |
| Surname: | |
| Mobile Number: | |
| Email Address: | |

| | |
|---|--|
| Current School/Preschool: | |
| Current Class: | |
| When do you wish to enrol your child: | |
| What class are you applying to enrol your child in? Junior Infants <input type="checkbox"/> Senior Infants <input type="checkbox"/> First Class <input type="checkbox"/> Special Class for Autism <input type="checkbox"/> | |
| Names of siblings (if any) currently enrolled in Holy Family Junior School: | |
| Names of siblings (if any) currently enrolled in Holy Family Senior School: | |

Signed: _____ **Parent(s)/Guardian(s) Date:** _____