

St. Patrick's National School

Harbour Road
Dalkey
Co. Dublin
A96 RR04

Tel: 01 280 3647
Email: stpatricks2@gmail.com
Web: www.stpatricksnsdalkey.ie



Notification of Intention to Apply

Full Name Applicant Pupil: _____

Date of Birth: _____

Name of Parent/ Guardian: _____

Name of Parent/ Guardian: _____

Telephone: _____

Email address: _____

Full Postal Address for Correspondence: _____

I/We wish to give notice of our intention to apply for enrolment in respect of the above named applicant pupil to St. Patrick's National School for term _____ in the school year _____ in accordance with the foregoing information and request that an application form be sent to me/us at the appropriate time.

I/We understand that this notification places the applicant pupil on a list of those requiring enrolment application for the stated term and year. I/We understand that this notification does not offer any preferment to the applicant pupil and does not guarantee any place for him/her either for the term and year requested or for any other term or year.

I/We understand that it is our responsibility to communicate to the school any change in our correspondence address.

Signed: _____

Signed: _____

Date: _____

Date: _____

This is not an application form and does not form part of the selection process. The school will make a record of parents wishing to enrol their child/ren for no other purpose than being in a position to post out application forms at the appropriate time.

For Office Use Only

Date Received: _____

Date Acknowledged: _____

DPP Sent: _____