



Presentation Primary School

Scoil Naisiúnta Na Toirbhirte

Slievekeale Road, Waterford. X91 CR 44

Tel. No: (051) 374995

E-mail: info@presentationprimarywaterford.ie

Roll No: 19955T

Application Form for Enrolment

Child's First Name: _____

Child's Surname: _____

Name child is to be known as in school (if different from above): _____

Child's Address: _____

Child's Date of Birth: _____

Does child have sisters already enrolled in school? Yes No

If Yes, please give name and class

Name _____ Class _____

Name _____ Class _____

Name _____ Class _____

Class in which child is to be enrolled: _____

Year of enrolment: _____

Month of enrolment: _____

Parental / Guardian Information

Parent Details:

Mother

Father

Name: _____

Address: _____

Mobile No: _____

Parent Details:

Mother

Father

Name: _____

Address: _____

Mobile No: _____

Declaration

Please read each statement and tick the box

I /We wish to enrol the above named child in Presentation Primary School.

I/We understand that all applications are subject to there being a place available in the school.

I/We understand that the completion and return of this application form does not imply acceptance of the application or enrolment in the school.

Signed: _____ Date: _____

Signed: _____ Date: _____

Office Only

Date received: _____

School Stamp