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Roll No: 16186G
Principal: Conor McKenna

INCH NATIONAL SCHOOL

Enrolment Application Form

The purpose of this form is to apply to enrol your child in Inch N.S. Please consult the school Enrolment Policy for details on the enrolment procedure and enrolment decision-making. This is an application form only.

A full registration form will be required prior to enrolment.

Year of Entry: _____ D. O. B. _____ PPSN No _____

First Name(s): _____ Boy ☐ Girl ☐

Surname: _____

Address: _____

Nationality: _____ First Language of the home: _____

Mother's Name: _____ **Contact phone number:** _____

Contact email address: _____

Father's Name: _____ **Contact phone number:** _____

Contact email address: _____

Name of other children in the school: _____

How did you hear about our school: _____

To whom should correspondence be addressed? _____

Other Information e.g. Health matters: Any special educational learning needs/details of referrals to other agencies/specialists (e.g. speech therapists, psychologists etc.)

Signed: _____ Date: _____

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Office use only: Date Received _____

The information you provide may be kept on manual file or electronic file or both by Inch N.S. for the provision and administration of an educational service. The Principal of Inch N.S. is responsible for the control of data collected. Provision of data on this form is an acknowledgement of your consent to the processing of the data on manual or electronic file or both. This data will only be disclosed on a need to know basis to personnel of Inch N.S.