Office Only: All Docs ☐ Aladdin ☐ POD ☐ Google Classroom ☐

Scoil Mhuire Junior

Blakestown, Mulhuddart, D15 F293.

Telephone/Fax: (01) 8216916

Email: office@scoilmhuirejunior.com

Website: www.scoilmhuirejunior.ie

Admissions Application Form 2027-2028

Which class is the application for:

Early Start ☐ *must be at least 3yrs 2mo on 01/09/2026

Junior Infants ☐ *must be at least 4yrs on 01/09/2026

Cois Céim (ASD) ☐

Another Mainstream Class ☐

Child Details:

First Name: _____ Surname: _____

Address: _____

_____ Eircode: _____

Gender: Male ☐ Female ☐ Date of Birth: _____ PPSN: _____

Nationality: _____ Religion: _____

(Catholic/Christian/Orthodox/Muslim/Protestant/Other/None etc)

Language(s) spoken at home: _____

If the child has lived outside of Ireland, when did he/she arrive in Ireland? _____

List any siblings who are in or may have attended the school: _____

Parent/Guardian Contact Details:

Mother's Name:	Father's Name:
Mobile No.:	Mobile No.:
Work No.:	Work No.:
Email:	Email:
Occupation:	Occupation:
Alternative Address if applicable:	Alternative Address if applicable:
Living with Spouse ☐	Living with Partner ☐ Living Alone ☐

Office Only: All Docs ☐ Aladdin ☐ POD ☐ Google Classroom ☐

Emergency Contacts (not the parents/guardians listed above):

Name:	Name:
Tel:	Tel:
Relationship to child:	Relationship to child:

Has your child been in previous education (creche/montessori/primary)? **Yes ☐** **No ☐**

If 'Yes': School Name & Address: _____ Tel: _____

MEDICAL INFORMATION:

None ☐ / Details: _____

*If your child has a medical condition, please ask for our school's **Medical Information Form** to complete*

****If your child has a report (Speech & Language/Occupational Therapy/Psychology etc.) please attach to this application, or if awaiting an assessment, please mention below.**

Please list any additional Social/Emotional/Behavioural/Dietary Information

PERMISSIONS

	Yes	No
I consent to my child's details being shared with the Dept. of Education	☐	☐
I understand that I cannot drop-off/pick up in the staff car park or park on Blakestown Drive behind the school	☐	☐
I consent to my child leaving school with my class to go on trips/tours	☐	☐
I allow child to go to church for school related occasions	☐	☐
I agree that my child may be taken out to a small group or have 1-to-1 teaching during their time in Scoil Mhuire Junior	☐	☐
In the case of emergency, if immediate medical attention is needed, that designated staff may take my child to A&E (parents/guardians would be contacted)	☐	☐
I give permission for Scoil Mhuire Junior to release all records in relation to my child when transferring school	☐	☐

Office Only: All Docs ☐ Aladdin ☐ POD ☐ Google Classroom ☐

Photographic/Video Permissions for social media – internal use	☐	☐
Photographic/Video Permissions for social media – public use	☐	☐
I understand my child's name will not appear with their photograph on school website/social media	☐	☐
I will ensure that, if my child has long hair, it is worn tied up at school	☐	☐
I will ensure that, if my child has his/her ears pierced, he/she will only wear stud earrings	☐	☐

CODE OF CONDUCT DECLARATION

I will ensure that my child will conform to Scoil Mhuire Junior's Code of Behaviour and Uniform Policy (which is available to read on our website: www.scoilmhuirejunior.com)	☐	☐

STAY SAFE and RSE Programmes

The ***Stay Safe*** and ***Relationship and Sexuality Education*** programmes are in use in the school. These programmes are taught as part of the SPHE curriculum. If parents wish that their child does not participate in the RSE programme, they are asked to put this in writing to the school. Letters are sent home before the teaching of these subjects.

Internet Access/Use

As a parent/guardian of the above child, I understand that **internet access** is designed for educational purposes. I also understand that the school cannot be held responsible if your child accesses unsuitable sites, but every reasonable precaution will be taken by the school to provide for online safety.

ETHNIC/CULTURAL INFORMATION

Please choose from the following:

White Irish	☐	Black/Black Irish - African	☐
Irish Traveller	☐	Black/Black Irish - Any other Black background	☐
Any other white background	☐	Asian/Asian Irish - Chinese	☐
Roma	☐	Asian/Asian Irish - Any other Asian background	☐
Other (Mixed Background)	☐	No Consent	☐

_____ _____

Signature of Parent/Guardian **Date**

. _____ _____

Signature of Parent/Guardian **Date**

Office Only: All Docs ☐ Aladdin ☐ POD ☐ Google Classroom ☐

DOCUMENTS ALSO NEEDED TO COMPLETE THIS APPLICATION

Extra documents needed	Early Start	Junior Infants	ASD	Other Class	Enclosed
Copy of child's original birth certificate	☑	☑	☑	☑	
Child's PPSN (on official document)	☑	☑	☑	☑	
Parent/Guardian photo ID	☑	☑	☑	☑	
Proof of address (utility bill)	☑	☑	☑	☑	
Creche report if applicable	☑	☑	☑		
School report from previous school if applicable				☑	
Any other relevant information (e.g. medical conditions).	☑	☑	☑	☑	
Medication Permission form if applicable	☑	☑	☑	☑	
Information/reports on any pending assessments/ diagnosis/ supports given			☑		
Letter from NCSE confirming child's eligibility to apply for a place in ASD class			☑		
A professional report detailing a diagnosis of a qualifying Autistic Spectrum Disorder (DSM V or ICD 10)			☑		
A recommendation to attend an Autism Class ***attached to a mainstream school.***			☑		
Report from a Speech and Language Therapist where applicable.			☑		
Report from an Occupational Therapist where applicable.			☑		
A report from a Psychologist on the student's cognitive ability/learning profile where applicable.			☑		

NB - This application will not be considered complete without the above documentation, and any false/misleading information given will render the application invalid.

Please contact the school immediately if there are any changes to the information provided.

All information given in this application is treated as confidential.