

CLONBONNY NATIONAL SCHOOL

APPLICATION FOR ADMISSION FORM 2025/2026

Please complete the form in **BLOCK CAPITALS**.

Please specify which class you wish to apply for: e.g. Junior Infants /1st etc:

Name of Child: _____

Date of Birth: _____

Home Address: _____

Eircode: _____

Name of Preschool/ previous school attended: _____

| Details of Parent/Guardian 1. | Details of Parent/Guardian 2 |
|--------------------------------------|-------------------------------------|
| Name: | Name: |
| Mobile No. | Mobile No. |
| Work No. | Work No. |
| E-mail: | E-mail: |

- To enter a Junior Infant class, a child must be 4 years old before the start of the school year.
- I understand that allocation of places in the school will be strictly on application number.
- I understand that the receipt of a pre-enrolment form does not guarantee that the child will be offered a place.
- I understand that it is my responsibility to inform the School of any change of address, telephone number, or other relevant circumstances.

I understand that if I have not replied to a confirmed offer of a place for my child within 14 days of that offer being made, I will have forfeited my child's place on the pre-enrolment list for 2025/2026

A copy of the full pre-enrolment and admissions policy is on our website or may be obtained from the School.

Signature of Parent/Guardian 1: _____ *Date:* _____

Signature of Parent/Guardian 2: _____ *Date:* _____

This form must be returned to: School Office, Clonbonny NS, Clonbonny, Athlone, Co.

Westmeath N37 EA21. Email: clonbonnyns@gmail.com

Please note: A further form requiring more detailed information will be forwarded to you should you be offered a place in the school and accept that place in writing.