



Noonan

Scoil Náisiúnta Cúil an tSúdaire 2
Sandy Lane,
Email: office@sandylanenationalschool.ie
Portarlinton,
Co. Laois,
8643281
R32 Y195.

Roll 18203N

Website: sandylanenationalschool.ie
Phone: 057

Principal: Mr. John

Chairperson Board of Management: Rev. Isaac Delemere

Enrolment Application Form 2026 – 2027

1. Please note this form must be completed **in full** and returned to us accompanied by **all** requested documentation. Incomplete applications will **not** be considered.
2. All details must be PRINTED. Please sign AND date form.
3. Please enclose copies of (i) birth certificate, (ii) proof of Applicant Student's address (i.e. utility bill in the name of parent/guardian dated within 3 months of the date of this Enrolment Application Form) and (iii) if applicable, documents specified under **B** Below.
4. The completion of this Enrolment Application Form does **not** guarantee a place in the school. Enrolment Applications will be considered at a Board of Management meeting after the closing date. You will be notified in writing whether the Applicant Student has secured a place in the school.

A .Details of Applicant Student: (please print)

Surname of child:		First Name of child:	
Child's Address:			
Eircode:			
Date of Birth of child:	Class you wish the child to be enrolled in:	Date/Year you wish the child to be enrolled:	
Religious denomination of child (i.e. religion the child is a member of), if any:			
State here name of religious denomination of child, if any:			
Is the child a member of a minority religion:		Yes ☐ No ☐	
Please sign the Statement below, only if the child is a member of a minority religion, AND you wish to do so:			
I/we, the Applicant(s), confirm that the Applicant Student is a member of the minority religion stated above and that I/we wish him/her to be educated in your Church of Ireland school as I/we feel that it provides a programme of religious instruction/education which is the same or has a similar ethos to the religious ethos of the minority religion of the Applicant Student.			
Signed: _____		Signed: _____	
_____		_____	

B. IF APPLICABLE: Evidence (as outlined below) to support the signed Statement under A above.

These documents must be provided ONLY IF the child is a member of the Church of Ireland, a Protestant reformed church or another minority religion of similar religious ethos to the Church of Ireland.

Please <u>enclose (1)</u> OR (2) OR have this form <u>stamped as per (3)</u> to prove membership of the stated minority religion	(1) An original letter, signed by relevant Church leader, confirming that the Applicant Student is a member of the minority religion stated above. Contact details for church leader to be included.	(2) Baptismal record issued by the minority religion stated above, which confirms that the Applicant Student has been baptised as a member of that minority religion.	(3) Original signature & stamp of the relevant Church Leader to be put on Section C below of this application form, confirming that the Applicant Student is a member of the stated minority religion.
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C. If applicable/necessary: Signature and Stamp of relevant Church Leader (as per B (3) above)

To be completed by relevant Church Leader:

I, (print name) _____, confirm by signing and affixing my stamp on this application form, that (insert name of Applicant Student)

_____ is a member of _____
_____ (insert full details of church/religious denomination)

Affix Church Stamp Here:

Signed: _____

Title: _____

Date: _____ Phone : _____

D. Details of transfer from another National School, if applicable:

If your child is currently attending another National School please state the name of the school, the class in which the child is currently enrolled and the reason for the proposed transfer.

Name of School:

School Roll Number:

Class child was in:

Reason for moving school:

E. Details of the Applicants (i.e. Parent(s)/Guardian(s) of Applicant Student): (please print)

Mother/Father/Guardian (delete as appropriate)	Mother/Father/Guardian (delete as appropriate)
Surname:	Surname:
First Name:	First Name:
Address: (if different to child's address)	Address: (if different to child's address)
Eircode:	Eircode:
Telephone	Telephone
Home:	Home:
Mobile:	Mobile:
Email:	Email:

F. Declaration by Applicant(s):

Declaration by Applicant(s):
I/We wish to apply to Scoil Náisiúnta Cúil an tSúdaire 2 to have (name of child) _____ enrolled in the school in (class) _____ on _____ (date). 1. I/We understand that the completion of this Enrolment Application Form does not guarantee that a place in the school will be made available to my/our child. Yes ☐ NO ☐ 2. I/We have read, accept and will support both the school's Code of Behaviour* & the school's Ethos/Mission Statement. * Yes ☐ NO ☐ 3. I/We have read the school's Admissions Policy. * Yes ☐ NO ☐ 4. I/We give permission for our/ my child to take part in the "RSE" Programme. Yes ☐ NO ☐ 5. I/We give permission for photographs/videos of my/our child to be taken in school and/or on school related activities, for use in school &/or for inclusion in our Diocesan magazine, school website, other publications/social media platforms, to promote the school and its pupils. Yes ☐ NO ☐ 6. I/We understand that the school has a uniform which must be worn in school. Yes ☐ NO ☐ 7. I/We understand that it is our responsibility to inform the school <u>in writing</u> if any of the details herein change in the future – especially address and phone contact details. Yes ☐ NO ☐ 8. I/We understand that, if our/my child is allocated a place in the school, there will be further documentation/information which has to be completed and given to the school and I/we undertake to do so promptly upon request. Yes ☐ NO ☐ 9. I/We confirm that we wish the Applicant Student to be educated in a school that provides a

programme of religious instruction/education which is based on the principles of biblical teaching as interpreted by the Church of Ireland.

Yes ☐ NO ☐

10.I/We understand that incomplete applications will not be considered by the Board of Management. Yes ☐ NO ☐

11.I/We confirm, by signing this form, that all the details herein are true and accurate.

Yes ☐ NO ☐

Signature of Father/Mother/Guardian: _____ Date: _____
(delete as appropriate)

Signature of Father/Mother/Guardian: _____ Date: _____
(delete as appropriate)

**Our Code of Behaviour, Ethos/Mission Statement and Admissions Policy are available on our website: sandylandenationalschool.ie. The information on this form will be processed in accordance with our Data Protection Policy.*