Rathgar National School	
Application for Admission in classes Senior Infants to 6 th Class	
Child's Name:	
Date of Birth:	Child's PPS Number:
Does your child have a sibling currently in the school?	Or does your child have a sibling that was in the school in the last 8 years?
yes 🔲 🛛 🛛 🗖	YES NO
Current School Attending:	Please state which class and year the applicant is requesting entry (eg 2 nd class, Sept 2024):
Parent 1 Name:	Parent 2 Name:
Parent 1 Address:	Parent 2 Address:
Parent 1	Parent 2
Mobile Number: Email Address:	Mobile Number: Email Address:
Please note: If seeking priority under Category 1 of the Admissions Policy proof of membership of a	
minority religion is NOT required at this stage. The school will be in contact requesting this documentation	
should a place become available.	
I/We confirm that we have read the Ethos Statement, Admissions Policy and Admissions Procedures on the	
school website. <u>www.rathgarns.ie</u> Please tick:	
Parent 1 Signature:	Parent 2 Signature:
Date:	Date:
Please return form SIGNED and DATED to Rathgar National School, Rathgar Avenue, D06DK35.	
If making application for more than one child, please indicate here whether you would accept a place for only one of the children. It is rare that places become available in multiple classes at the same time.	