



RATHGAR JUNIOR SCHOOL & KINDERGARTEN
62 & 63 Grosvenor Road, Dublin 6
Phone 01-497 2411, Email: admin@rathgarjuniorschool.com

Register No:

Date Received
 ____/____/____

APPLICATION FOR ADMISSION

Name of child (in full):.....

Class Level being applied for:

Intended Year of entry:

Date of birth:.....

PPS. No:.....

Nationality:

Name, address and profession or occupation of Parents or Guardians.....

.....

Is either parent a past pupil of the school?.....

Does your child have a sibling currently in the school? Y/N (Name: _____ Class _____)

Has the child been to any other school? If so, state name and address of school:

.....

Has your child been formally assessed for a special education need? e.g. psychological report, speech and language, occupational health, etc. Yes No

Please provide further details if yes:

.....

Please give any information on medical or educational history which might influence your child's progress in school that we should be aware of:

.....

To what age (approximately) do you intend your child to remain with us?

- When vacancies occur, preference is given to children whose parents wish them to complete the Junior School course (up to approximately 12 years of age) without a change of school. Should a child be removed from the school before completing Form 6, any sibling's application will be automatically transferred to the end of the waiting list, which may result in the child not receiving a place.
- Fees are payable in advance. Where a decision is made to accept a place, €1,500 must then be paid. This advance payment is retained until the end of Form six. Removal of a pupil before completion of Form Six will result in the forfeiting of your deposit. One full term's notice in writing is required before the removal of a pupil, failure to do so will result in a term's fees in lieu of notice being required.
- Absence because of illness or other reasons does not entitle one to any reduction of fees. However, the loss of fees through illness can be covered by payment of a small premium through the School Insurance Scheme.

Signature of Parents

Mother

Phone Number:.....

E-mail:.....

Date:.....

Father

Phone Number:.....

E-mail:.....

Please note that the school may not be suitable for children with physical disabilities who require a wheelchair, as we do not currently have access ramps or a lift in the school.