

Sandford Parish National School

Sandford Close, Ranelagh, D06 V2V6. **Tel:** 01 497 4277 **E-mail:** secretary@sandfordparishns.ie **www.sandfordparishns.com** *All correspondence addressed to: Mrs Jennie Kirwan, Principal.*

Application Form for ALL OTHER Classes (Snr Infants to 6th Class) 2026/2027

Ethos Statement

Sandford Parish National School is a co-educational Church of Ireland School under the patronage of the Church of Ireland Archbishop of Dublin. This means that the school reflects the ethos of the Church of Ireland, "ethos" being the doctrines, moral teachings, traditions, practices, and customs of the Church of Ireland as defined by the General Synod. The work of the school is conducted in an atmosphere of respect and tolerance. The Board of Management is responsible for upholding the ethos of the school and is accountable to the Patron.

All sections must be fully completed.

Applicant Student Details

| - A1778 | |
|--|--|
| Full Name of Applicant Student | |
| Full Postal Address of Applicant Student | |
| Eircode | 1 |
| Date of Birth of Applicant Student | |
| Applicants must be at least 4 years old (or older, if applicable) by the first day of the school year for which they are applying for enrolment. | |
| PPSN of Applicant Student | |
| Does the Applicant Student have any siblings in Sandford | |
| Parish National School? | The state of the s |
| Is the Applicant Student a member of a minority religion? | |
| | |

Parent(s)/Guardian(s) Details (The Applicants)

| Name: | Name: |
|----------------------|----------------------|
| Full Postal Address: | Full Postal Address: |
| | |
| Eircode: | Eircode: |
| Email: | Email: |
| Phone Number: | Phone Number: |

The following documentation must be provided with **ALL** applications:

- Original Birth Certificate
- Proof of address (must be dated within last 3 months)

If all relevant documentation is not provided with the application form, the application will not be considered until such time as all relevant documentation is furnished, and only then if furnished prior to the closing date.

Acknowledgement of receipt of documentation will be sent by email only. Original documents will be returned in SAE, if provided or can be collected from the school after application period closing date.

| Applicant | Student in Priority Category 1 & 2 (see Admission Policy 5.1i and 5.1ii) | | | | |
|---|--|-----------------|----------------|--|--|
| Applican | Student in Priority Category 1 & 2 (see Admission Policy 5.11 and 5.11) | | | | |
| I/We ded | lare that the Applicant Student is a member of the Church of Ireland or | Yes | No 🗌 | | |
| | t reformed church or is a member of a minority religion which has the same | | | | |
| _ | ethos, or a similar ethos to the programme of religious | | | | |
| | n/education which is provided in the school. | | | | |
| _ | n the Applicant Student to be educated in a school that provides a religious ne of Church of Ireland education. | Yes | No | | |
| I/We hav | e included an original baptismal certificate or signed letter from our Church | Yes — | No: | | |
| | nfirming membership of our religious community, as defined under Priority 1 and 2 (Admissions Policy 5.1i and 5.ii). | | | | |
| | If "yes" to the above, at least one of the following must be provided with | the applicatio | n. | | |
| - | from the relevant religious leader confirming, that the Applicant Student religion or | t is a member | of the | | |
| • | | | | | |
| | been baptised as a member of the minority religion <i>or</i> | | | | |
| The signature <u>and</u> stamp of the relevant Church leader on the application form confirming, that the Applicant Student is a member of the minority religion (See Box Below). | | | | | |
| | me of Applicant Student) is a member ofenomination). Date: | (00 | | | |
| Position | Held: Phone No: | | | | |
| Church S | camp: | | | | |
| | | | | | |
| Please Retur | <u>n witn:</u> | | | | |
| _ | al Birth Certificate. | | | | |
| | of Address (must be dated within 3 months). | l · D t t - · | -t Defermed | | |
| Churc | nce to support statement of belonging to a religious denomination of Church of Irela h or membership of a minority religion with the same or similar religious ethos as the priate). | | | | |
| Applications | which do not include the above will be deemed incomplete and will not be conside | red by the Boar | d of Managemer | | |
| | Signature of Parent(s)/Guardian(s) (The Applicants) |) | | | |
| • | I/ We understand that the completion of this application does not gua school will be made available to my/our child. | rantee that a | place in the | | |
| • | I/We have read and accept the Admission Policy, Data Protection Policy (available on the school website). | cy, and Code o | f Behaviour | | |
| • | I/ We confirm that all the information entered on this form is accurate. | | | | |
| Signature of | parent/ guardian: Date: | | | | |
| | | | | | |

The information entered on this form is processed in accordance with our Data Protection Policy.

Signature of parent/ guardian: ______ Date: _____

CLOSING DATE FOR RECEIPT OF COMPLETED APPLICATIONS IS 24th OCTOBER 2025 AT 2:30PM.