Appendix 1.

EXPRESSION OF INTEREST FORM- School Year 2026/2027

Name of Child (in full, as on Birth Certificate):

_____

Address at which child resides:

_____

_____

Eircode: _____

Telephone No: _____ Date of Birth: _____

Nationality: _____ Country of Birth: _____

Father's Name: _____ Telephone No: _____

Father's email: _____

Mother's Name: _____ Telephone No: _____

Mother's email: _____

Did your child attend preschool: _____For how long: _____

Is your child enrolled in another school: YES/NO **(please circle as appropriate).**

If yes, please state school's name and date of enrolment:

_____

_____

_____

Has your child ever had a psychological assessment? Yes ____ (**Please note that a copy of the psychological report must be attached to this form)**

Note 1: This form is not a guarantee of a place or implication of a guarantee of a place
Note 2: Applications will only be accepted on the basis of a psychological report provided by a qualified professional. (Maximum 2 years old).

Office Use Only:

Received on (please insert date):