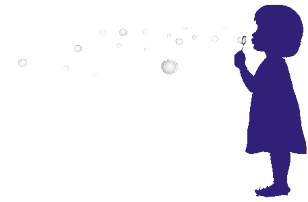


St. Teresa's Special School



Application for Enrolment to St. Teresa's Special School

Application for the year _____			
Child's Forename		Child's Surname	
Address of child:	_____ _____ Eircode _____		
Date of Birth		Age	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Name Parents/Guardian	Mother _____ Father _____		
Parent Contact Address and Eircode(must be included)			
Mother's Phone Number:		Fathers Phone Number:	
Which class are your applying for ASD Preschool Class <input type="checkbox"/> ASD Junior Class <input type="checkbox"/> ASD Senior Class <input type="checkbox"/> Junior Class Complex Needs class <input type="checkbox"/> Senior Complex Needs Class <input type="checkbox"/>			



Please Note:

We require a letter from your Psychologist stating your child's diagnosis, to support your child's Application for Enrolment. This is to ensure that they meet criteria for enrolment.

We do not require your child's actual reports until he/she is accepted for enrolment to our school.

If you have any queries please contact the school Principal at 09096 43934