



ENROLLMENT FORM 2025/26

1. Child's Personal Details

Name of Pupil _____ Date of Birth: _____

PPS NO _____ (please print clearly)

Address: _____ Eir Code: _____

Email: _____

2. Parent/Guardian Information

Mothers Name: _____ Telephone /mobile _____ (work) _____

Address: _____ Eir Code: _____

Email: _____

Fathers Name: _____ Telephone/mobile _____ (work) _____

Address: _____ Eir Code: _____

Email: _____

Emergency contact name _____ Number: _____

Contact Address _____

3. Other Information

Other schools attended: _____ year: _____

Class _____ Reason for leaving _____



4. Medical Information _____
(Medical documentation, where relevant will be required if you child is enrolled in the school.)

Family Doctor: _____

Name of Chemist (in case of emergency or drugs query) _____

Any known Medication Allergies _____
(Please fill in details on Summary of Needs Form)

5. Other information

Number of children in the family _____

Name of children _____

Things which your child likes _____

Things which your child dislikes _____

Hobbies or interest which your child enjoys _____

Is there any other information which you feel should be highlighted to help us to care for
Your child _____

I wish to enroll my child in St. Teresa's Special School and declare that the above information
is correct. I have enclosed all relevant documentation and information that may be required
under the Education Welfare Act

Signature of Parent(s)/Guardian _____ **Date:** _____

Copy of Birth Certificate to be enclosed

*Psychology report, ADOS Report and/or other Multidisciplinary reports must be enclosed if
not already given to the school)*