Ennis National School
Ashline, Kilrush Road, Ennis, Co. Clare.
V95 DE44
Roll No. 15042A
065 6829158
email: info@ennisns.ie
www.ennisns.ie

Application Form for Enrolment in the Reading Class

Child's Surname	
Child's First Name:	
Gender:	
PPS Number:	
Date of Birth:	
Current School:	
Current Class:	
Address (with Eircode)	

Parent / Guardian 1	
First Name:	
Surname:	
Mobile Number:	
Email Address:	
Address:	

Parent / Guardian 2	
First Name:	
Surname:	
Mobile Number:	
Email Address:	
Address:	

Name of Psychologist:	
Date of Psychologist's Report:	
(Please include a copy of the psychologist's report with this form	

I / we being the parent/guardian of _____ *wish to apply to enrol* _____ *in the Reading Class in Ennis National School in the school year*_____.

Signed: _____Parent(s) / Guardian(s) Date:_____

Privacy Notice – Sharing of Data with the NCSE Please note that if your child is placed on a waiting list for a place in this special class, their personal data may be shared with the National Council for Special Education (NCSE) for the purposes of planning and managing the provision of special education placements, as required under the Education for Persons with Special Educational Needs Act 2004. This may include your child's name, date of birth, PPSN, and relevant information from this application.
Please see our admissions policy on our website. Completed applications forms should be posted/submitted to Principal, Ennis National School, Ashline, Ennis, Co. Clare before the end of February..