



Application Form for Enrolment _____ (School Year)

Anim an Pháiste (Child's Name)	
Inscne (Gender)	
Dáta Bréithe (Date of Birth)	
Scoil reatha Current School:	
Seoladh (Address of child)	
Alternate Address	
Class options: (Mainstream/Early Intervention Pre-school/Asd Class.	

Parent / Guardian 1	
Anim (First Name)	
Sloinne (Surname):	
Uimhir ghutháin (Mobile Number):	
Ríomhphost (Email Address):	
Seoladh (Address):	

Parent / Guardian 2	
Anim (First Name)	
Sloinne (Surname):	
Uimhir ghutháin (Mobile Number):	
Ríomhphost (Email Address):	
Seoladh (Address):	

Signed: _____ Parent(s) / Guardian(s)

_____ Parent(s) / Guardian(s)

Date: _____

Please see admissions policy on www.gdr.ie .Completed applications forms should be emailed to oifig@gdr.ie or posted to Gaelscoil Donncha Rua, Bothar Linne, Sionna, Co An Chlár.