

St. Oliver’s N.S.

**Pre-Enrolment Form 2025-2026**

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| **Child’s Details** | | | |
| First Name: |  | | |
| Surname: |  | | |
| Date of Birth: |  | | |
| Address: |  | | Eircode: |
| P.P.S. No: |  | Church of Baptism: | |

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| **Parents’/Guardians’ Information** | | |
|  | Parent/Guardian 1 | Parent/Guardian 2 |
| First Name: |  |  |
| Surname: |  |  |
| Address &  Eircode: |  |  |
| Phone Number: |  |  |
| Email address: |  |  |

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| **Other Information** | |
| Siblings currently attending St. Oliver’s N.S. |  |
| Siblings/Parents who are past pupils of St. Oliver’s N.S. |  |

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| **Any other relevant information** |
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St. Oliver’s N.S.

* I understand that the completion of this pre-enrolment form **does not guarantee a place for my child.**
* I understand that places will be offered during the month of March 2025.
* It is my responsibility to inform the school promptly of any changes of address, telephone number or other relevant circumstances.
* I give permission for St. Oliver’s School to keep the above details on file and to contact me/us on the above contact details.

**The signatures of both parents/guardians are required.**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please post to: Principal, St. Oliver’s School, Heywood Road, Clonmel, Co. Tipperary.**

Please feel free to contact the school if you have any queries or require further information on

[reception@stoliversclonmel.ie](mailto:reception@stoliversclonmel.ie) or phone (052) 6121016.

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**OFFICE USE ONLY:**

Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_