



Admissions Application Form 2026/2027

Scoil Cholmcille, Murroe NS, Dunfanaghy, Co Donegal

Roll No: 14704P

Phone: **074 9136702** email: **murroenationalschool@gmail.com** website: **www.murroens.com**

Please note that this form is for application purposes only. The information provided will be used to allocate Junior Infant places in accordance with the School's Admission Policy/Annual Admission Notice

Pupil's Details:	
First Name: _____	
Last Name: _____	
Male/Female: _____	
Date of Birth: _____	
P.P.S. Number: _____	
Home Address: _____ _____	
Eircode: _____	
Intended Class: _____	
Country of Birth: _____	
Nationality: _____	
If other than Irish, please state date of arrival in Ireland: _____	
Languages spoken in the home: _____	
Religion: _____	
Parent/Guardian Details	
First Name: _____	
Last Name: _____	
Relationship to child: _____	
Home phone number: _____	
Work phone number: _____	
Mobile phone number: _____	
E-mail address: _____	
Parent/Guardian Details	
First Name: _____	
Last Name: _____	
Relationship to child: _____	
Home phone number: _____	
Work phone number: _____	
Mobile phone number: _____	
E-mail address: _____	
Additional Details: (Please fill where applicable)	
Name of Previous School/Pre-School: _____	
Address: _____	

Principal/Manager's Name:

Phone Number:

Are there any orders or other arrangements in place, governing access to or custody of your child?

Yes

No

I have read a copy of Scoil Cholmcille, Murroe National School's Code of Behaviour Policy (available on <http://www.murroens.com> or please request copies directly from the school if you cannot access them) I agree that my child and I will abide by this policy and support the ethos of the school while attending Scoil Cholmcille, Murroe NS and any school related activities.

Yes

No

Signed: _____ Date: _____

Please ensure that you have included a Birth Certificate and Baptismal Certificate (if applicable) with this form. These documents will be photocopied and returned to you.

Principal's signature: _____

Date: _____

Birth Certificate received: Yes No Returned _____

Baptismal Certificate received: Yes No Returned _____

Office Use only:

<i>* Date Application Received</i>	Date	Mth	Year