



APPLICATION FORM – Main School 2025/2026

*All Applications for Special School Placement **must** be supported by a professional recommendation that a Special School placement could be considered.*

Child's Details:

Name: _____

Date of Birth: _____

Address: _____

Eircode: _____

PPS Number: _____

Religion: _____

Nationality: _____

Your child's age on **1st September 2025**: Years: Months:

Does your child have a **Professional Report** that recommends a Special School placement could be considered?
Yes: No:

Does your child have a sibling **currently** attending St. Paul's Special School: Yes: No:

Name of Sibling attending St. Paul's Special School _____

Has your child attended an Early Intervention Class: Yes: No:

If Yes, please provide name & address of Early Intervention Class attended:

Dates attended From: _____ To: _____

Has your child attended another School /Educational Setting: Yes: No:

If Yes, please provide name & address of School attended:

Class attended: From _____ To _____

Dates attended: From _____ To _____



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Does your child suffer from any medical condition: Yes: No:
If yes, please give details:

Does your child take any medication: Yes: No:
If yes, please give details:

Does your child suffer from allergies: Yes: No:
If yes, please give details:

Please ensure (by ticking the box below), that you have enclosed the **fully completed** following relevant documentation with this Application Form:

- Psychology Report (DSM V)
- Speech & Language Report
- Occupational Therapy Report
- Psychiatry Report/Developmental Paediatric Report

Parent/Guardian Details:

Mother: _____ Father: _____
Name: _____ Name: _____
Address: _____ Address: _____
Mobile No: _____ Mobile : _____
Email: _____ Email: _____

Emergency Contact Details: (if parent/guardian not available)

1. Name: _____ No: _____ Relationship to Child: _____
2. Name: _____ No: _____ Relationship to Child: _____

Parents/Guardians signatures:

_____ Date: _____
_____ Date: _____



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Reports cannot be accepted after the application closing date. All applications must include a diagnostic report. Incomplete applications will not be considered for admission. Late Applications shall be retained and will be subject to the processes detailed in the enrolment policy.

OFFICE USE ONLY:

Date Application Received _____