 Gaelscoil Chluain Dolcáin

Bóthar Nangair

Cluain Dolcáin

Baile Átha Cliath 22

Fón: 01-4574970

Email: oifig@gscd.ie

Láithreán Greasáin: www.gscd.ie

**Foirm Iontrála (Enrolment Form September 2024)**

Ainm/ Child’s Name: …………………………………………………………………………………..

Dáta Breithe / Date of birth: ……………………………………………………………………………

PPS Number: ……………………………………………………………………………………………

Seoladh / Address: …………………………………………………………………………………......

…………………………………………………………………………………......................................

Ainmneacha na dTuismitheoirí / Parents’ Names:……………………………………………………...

…………………………………………………….

Gairmeacha Bheatha / Occupations: ………………………………………………………………….

………………………………………………………………….

Uimhreacha Guthán / Phone Numbers: Baile/Home: …………………….

Mother’s Work: ……………………. Father’s Work……………….

Mother’s Mobile: ……………………. Father’s Mobile:..…………..

An bhfuil deartháir / deirfiúr sa scoil? / Does he/she have any brother/sister in the school?……..........

Ainm an Pharóiste agus ainm an tSagairt Paróiste / Name of Parish and name of Parish Priest:

(This is needed for School Records)

…………………………………………………………………………………………………………

…………………………………………………………………………………………………………

Aon tinneas nó riachtanais breise / Any illness, allergies or additional needs which you feel your child’s school should be aware of:

……....................................................................................................................................................

...........................................................................................................................................................

Dochtúir Teaghlaigh / Family Doctor ..…………………………………………………………….

Seoladh/Address……………………………………………………………………………………..

Uimhir Teileafóin an dochtúra / Doctor’s telephone number: ……………………………………….

Ainmneacha agus uimhreacha i gcás éigeandála/Contact persons in case of emergency

Ainm / Name:……………………………………………………………………………………...

Seoladh/ Address: …………………………………………………………………...……………

…………………………………………………………………………………………………….

…………………………………………………………………………………………………….

Uimhir Ghutháin / Telephone Number:…………………………………………………………..

Cén fáth go bhfuil suim agat do pháiste a chur ag Gaelscoil?

Why are you interested in sending your child to an All-Irish School?

…….................................................................................................................................................

…………………………………………………………………………………………………….

Cumas na dTuismitheoirí sa Ghaeilge? / Parents ability to speak Irish?

Fluent Fair Very little

Athair / Father

Máthair / Mother

Ar fhreastal do pháiste ar aon Naíonra / Did your child attend any pre-school / Playgroup?

…………………………………………………………………………………………………….

Aon eolas eile? / Any other information you consider relevant?

…….................................................................................................................................................

Síniú na dTuismitheoirí / Parents’ Signature:

…….................................................................................................................................................

Dáta / Date:.................................................................................................................................................

Líon isteach an fhoirm seo agus cuir ag an scoil í, roimh 31ú Eanáir 2024

Please complete and return this form, together with your child’s Birth Certificate, to the school before January 31st, 2024

Shane Dáibhéis

Príomhoide

Faigheann Gaelscoil Chluain Dolcáin agus Gaelscoil na Camóige foirmeacha iarratais le haghaidh na daltaí céanna gach bliain/Gaelscoil Chluain Dolcáin and Gaelscoil na Camóige receives application forms for the same pupils each year.

**Cuir ciorcal timpeall do rogha scoile thíos:**

*Please indicate your preference of school below:*

*(e.g. 1st Preference - circle 1,  2nd preference - circle 2)*

Gaelscoil Chluain Dolcáin1     2

Gaelscoil na Camóige 1     2