

## St. Anne's Secondary School Application Form for Enrolment for 2025/2026



1. Student's Name:	
2. Address:	
3. Age:	Date of Birth
4. Nationality:	
5. PPS Number:	
6. Mother's Maiden Name:	
Mother's Contact Number:	
7. Father's Full Name:	
Father's Contact Number:	
8. Parent e-mail Address	
9. Please address this label as	Name:
you would like it to appear	Address:
on all correspondence from	
the school to you	
10. Emergency Contact Nu	mhor
io. Emergency Contact Nu	mber
11. Emergency Contact Na	me
12. Emergency Contact's Re	elationship to Student
13. Family Doctor	
14. Present School	
15. Any other relevant inform	nation
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Please turn over to sign this form



## Signatures:

Parent/Guardian:	Date:
Parent/Guardian:	Date:
Student:	Date:
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When returning the application form, please enclose the student's original Birth Certificate (which will be photocopied and returned).

Completed application forms can be returned by email to: <a href="mailto:">info@stannesschool.ie</a> or by post to: Enrolments, St. Anne's Secondary School, Rosanna Road, Tipperary Town, Co. Tipperary or by hand to the Secretary's Office.

Closing Date: Completed application forms to be returned on or before Friday,

November 22<sup>nd</sup> 2024.