



St. Bernadette's Senior N.S.

(01) 6267116

Quarryvale,
Clondalkin,
Dublin 22,
D22PW58

office@bernadettes.ie

Roll no: 19785U

Under the patronage of Most Rev. Dermot Farrell, Catholic Archbishop of Dublin

APPLICATION FOR ADMISSION
APPLICATION FOR ADMISSION OF NEW PUPILS **2026/2027**

*Application for admission does not guarantee a place in St. Bernadette's SNS.
*Our Admissions Notice and Admissions Policy are available at www.bernadettes.ie

Child's Details:

Child's First Name: _____ Child's Surname: _____ (As on Birth Certificate)

Name usually called: _____

Date of Birth: ____/____/ 20____ Gender: Male Female

Your child's proposed class: 3rd class 4th class 5th class 6th class ASD class

Copy of birth certificate included: YES NO

ASD CLASS: also required is : Diagnosis Report(s)
A letter from the NCSE confirming that the child is known to them

Family Details:

| | Parent / Guardian 1 | Parent / Guardian 2 |
|-----------------------|---------------------|---------------------|
| Name | | |
| Address | | |
| Eircode | | |
| Telephone No. | (08) | (08) |
| Email Address 1 | | @ |
| Email Address 2 | | @ |
| Relationship to pupil | | |
| Language(s) spoken | | |

Where both parents are legal guardians, **both** must sign the admissions application form.

Signed: _____ **Signed:** _____
Parent/Guardian 1 Parent/Guardian 2
Date: ____/____/ 20____

If this application form is being signed by **one parent only** please read and sign the following:
I _____ confirm that both parents of _____ are aware of & consent to this enrolment application to St Bernadette's Senior School.

Charities Regulator: Registered Charity Number 20120290