



Nano Nagle College

First Year Enrolment Application Form 2026

Please complete in BLOCK CAPITAL

This application is for: Mainstream ☐ Special Class ☐

STUDENT INFORMATION

All information must be completed

Surname: _____ First Name: _____ Student PPS No. _____

Address: _____ Eircode: _____

Date of Birth: _____ Nationality _____ Country of Birth _____

Name and Address of current Primary School

Email address to receive acknowledgement of application

Names of sons/daughter's currently attending Nano Nagle College.

1. Name: _____ Date of Birth: _____ Class: _____

2. Name: _____ Date of Birth: _____ Class: _____

Why have you chosen this school for your son/daughter? (Tick Below)

Parent was a past pupil ☐

My son/daughter is a past pupil ☐

Another son/daughter is currently attending Nano Nagle College ☐

None of the above ☐

DETAILS OF PARENTS/GUARDIANS

	Name	Mobile No	Work Phone No.
Name of Mother			
Name of Father			
Mother's maiden name			

SPECIAL EDUCATIONAL NEEDS AND/OR MEDICAL ISSUES

Does your son/daughter have a Special Educational need? Yes ☐ No ☐

Does your son/daughter have a relevant medical issue? Yes ☐ No ☐

Please give details:

I/We consent to the information given on the above form being held by the school and to it being shared with the Department of Education and Skills, and I/We agree to appropriate testing to monitor her progress on a twice yearly basis.

Signature (1) _____ (2) _____
Parent/Guardian Parent/Guardian

CODE OF BEHAVIOUR AND DISCIPLINE

I have read and agree to fully accept the code of Behaviour and Discipline of Nano Nagle College.

Signature (1) _____ (2) _____
Parent/Guardian Parent/Guardian

I certify that the above information is correct and I wish to have the above named child considered for registration in Nano Nagle College

Signature (1) _____ (2) _____
Parent/Guardian Parent/Guardian

I/We have enclosed a copy of :

Birth Certificate Yes _____ No _____

Proof of address(Utility Bill or other record with named parents/guardian) Yes _____ No _____

For Office Use:

Date of Application: _____