



Nano Nagle College

Enrolment Application Form 2026 / 2027 Academic Year

Please complete in BLOCK CAPITALS

This application is for: Mainstream Special Class Year Group: _____

STUDENT INFORMATION

All information must be completed

Surname: _____ First Name: _____

Student PPS Number: _____

Address: _____

Eircode: _____ Date of Birth: _____

Nationality: _____ Country of Birth: _____

Email address to receive acknowledgement of application:

Name and Address of current School:

Names of sons/daughters currently attending Nano Nagle College:

1. Name: _____ Date of Birth: _____

2. Name: _____ Date of Birth: _____

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

Principal: Mr. Kieran Verryt

Deputy Principal: Mr. Paul O'Reilly

DETAILS OF PARENTS/GUARDIANS

Name of Mother: _____ Contact Number: _____

Name of Father: _____ Contact Number: _____

Other guardian (*if relevant*): _____ Contact Number: _____

SPECIAL EDUCATIONAL NEEDS AND/OR MEDICAL ISSUES

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

If yes, is there an official diagnosis of this condition? Yes No Date of report: _____

If yes, can we contact previous school for relevant educational reports? 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)

Signature (2)

CODE OF BEHAVIOUR AND DISCIPLINE (AVAILABLE ON SCHOOL WEBSITE)

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

Signature (1)

Signature (2)

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)

Signature (2)

I/WE HAVE ENCLOSED A COPY OF:

Birth Certificate: Yes No

Proof of Address: (*utility bill or other record*) Yes No

For Office Use:

Date of Application:

Principal: Mr. Kieran Verryt

Deputy Principal: Mr. Paul O'Reilly