

Maynooth Educate Together National School Railpark, Celbridge Road Maynooth, Co.Kildare

Roll Number: 20292E Ph: 01-5054250 secretary@maynoothet.ie www.maynoothet.ie

Junior Infant Application Form-2024/2025

- Junior infants must have reached 4 years of age on or before 1st of June in the year of admission.
- The child's name recorded on this form must be the same as that on his/her birth certificate.
- Submission of this form does **not** guarantee a place for your child in METNS.
- This form must be submitted to the school by 26th January 2024.

Please complete this form in BLOCK CAPITALS

Child's First Name:	Child's Middle Name:		Child's Surname:			
Date of Birth: DMY	Gender: Male Female					
Address (including Eircode):	1					
Parent/Guardian Name 1: Parent/Guardian Name 2:						
Parent/Guardian 1 Ph. Number:		Parent/Guardian 2 Ph. Number:				
Parent/Guardian 1 Email:		Parent/Guardian 2 Email:				
PPSN of child:	Does your child have a medical condition? If so please specify.					
I am applying for a place in the ASD class for my child yes □						
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Pre-school attended:	Number of years attended:		Did your child receive AIM support: Level:			
Do you have any reports or additional information that may be helpful in supporting your child in our school? If yes please specify e.g. Speech and Language, Psychology, OT, medical etc.						
Does your child have a sibling currently attending this school? If yes, please specify- Name(s) of sibling(s):						
I understand, in submitting this a available to the Department of E	Education,	in order to plan f	or school development.			
Signature Parent/Guardian 1: 2						
Date : DMYY	_					
Office use only: Copy of original birth	cert obtaine	d 🗆				