

Scoil na gCeithre Máistrí
Foirm Chláraithe

Faoi Rún / Confidential

Sloinneadh An Pháiste

Surname of Child _____

Ainmneacha Baiste

Christian Name _____

Seoladh

Address _____

Dáta Bréithe

Date of Birth _____

Dáta Tosaithe

Date Starting school: September 20 _____

Uimhir Teileafón

Telephone Number _____

Uimhir Oibre

Work Number _____

Ephost

Email _____

Slí Bheatha An Athair

Father's Occupation _____

Slí Bheatha Na Máthar

Mother's Occupation _____

Ar Fhreastal an Páiste ar aon Reamhscoil

Did the Child attend any Pre School?

Ar Fhreastal An Páiste ar aon scoil eile roimhe seo

Did the Child attend any other school previously

Aon fhadhb phearsanta no tinneas ba chóir, ar mhaithe le leasa an pháiste, a bheith ar eolas ag Príomh Oide na Scoile

Any personal difficulties or illness which, for the child's own benefit should be known to the Principal of the Gaelscoil

Táim sásta le h aidhmeanna Gaeilge agus Oideachasula na scoile agus, da reir, déanfaidh mé gach dícheall tacú le mo pháiste, sa bhaile, na haidhmeanna sin a bhaint amach. I am satisfied with the Irish language and educational aims of the school and accordingly, I will make every effort to support my child, at home, to achieve those aims.

Siniú: Tuiste/Caomhnoir

Parent/Guardian. _____

Dáta / Date: _____