



ST. JOSEPH'S SECONDARY SCHOOL

FOXFORD, CO. MAYO

Principal: Mr. Brendan Forde M.A. H.D.E. Dip. Man.Ed

Deputy Principal: Miss Eileen O' Brien M.Ed. Dip. Planning

Telephone: (094) 9256145/9257898 | Fax: (094) 9256126 | Email: info@stjosephsfoxford.com

ENROLMENT FORM FOR NEW ENTRANTS (Transferring from other schools)

(Please complete in BLOCK CAPITALS)

Surname: _____ First Name: _____

Address: _____

E-mail address: _____

Previous National School: _____

Previous Secondary School: _____

Sex: _____ Religion: _____ Date of Birth: _____ PPSN No: _____

Mother's Name _____ Mobile No: _____

Father's Name: _____ Mobile No: _____

Nationality: _____ Doctor: _____

Health: _____

(Full details must be supplied to the Principal in writing) (i.e. Asthma, Epilepsy, Allergies, Speech, Hearing, Sight difficulties.) **This information will be treated as confidential.**

Details of any Disabilities or Special Educational needs:

(Please supply on another page if necessary)

Number of Children in Family: _____ Position in Family: _____

Name of brother(s)/sister(s) who attend/attended St. Joseph's Secondary School:

Any other information: _____

Signed: _____ Date: _____

Note:

St. Joseph's Secondary School has an Admissions Policy. Copies are available from the School Secretary. Enrolment in St. Joseph's implies acceptance of the Code of Behaviour and other school policies.