

Bishopstown Community School

Notification of Intention to Apply

Year of Entry: 2020 2021 2022 2023

(Tick the appropriate box)

Name of Child _____

Address of Child _____

Place in Family: _____ Parent's Phone No: _____

Parents Email: _____

Brother or Sister in Bishopstown Community School YES NO

Current School: _____

Mothers Name: _____ Fathers Name _____

I/We wish to give notice of our intention to apply for enrolment in respect of

_____ (applicant's name) to Bishopstown Community School.

I/ We understand this notification does not offer any preferment to the applicant pupil and does not guarantee any place for him/her for the year requested. I/We understand that it is our responsibility to communicate to the school any change in our correspondence address

Mothers Signature _____ Date : _____

Fathers Signature _____ Date : _____

Please fill and return on the Open Night. The latest return date is Thursday 26th September 2019