APPLICATION FORM

Saint John Bosco Junior Boys' School Navan Road Dublin 7.

PLEASE COMPLETE THIS FO	RM IN BLUCK CAPI	IALS.	
Boy's Name:(First Name and Surname)		FIRST C	LASS SEPTEMBER 2023
(FIRST Nam	ne and Surname)		
Date of Birth:			
Address:			
Eircode:			
Name of:			
(a) Father:	(b) Mother:		_
<u>Telephone Number(s):</u>			
<u>Father</u>	(1.) 14/1	() M 1 '1	
(a) Home:	_(D)	(C) MODII	e:
Email address			
<u>Mother</u>			
(a) Home:	_(b) Work:	(c) Mobil	e:
Email address			
Brother on school campus?	Yes 🔲 No 🗀	Name(s) and Class(es)	
Sister on school campus?	Yes No No	Name(s) and Class(es)	
Parent a member of staff in school on campus? Yes No School			
You ag	gree to authorise the other so	chool(s) to confirm these det	ails to the Board
Please enclose the follo	owing documents	5:	
Birth Certificate	(All Applicants)	_	
•	Boys in Catchment Are	,	
Utility Bill/Correspondence Revenue (W	ithin 3 months of closi	ng date)	
Completion of this form doe			
All forms must be complete			vant documents.
The address given must be the child's actual place of residence. I declare the above information to be correct and understand that it will be treated as confidential.			
I understand that all information collected by the school is protected by GDPR (General Data			
Protection Regulation) and that it will be used solely for the purpose for which it was collected, in accordance with the school's data protection policy.			
accordance with the SCHOOL	s uata protection po	лісу.	
Signed:	(Parent/Guardian) D	pate: