



Address: Beechwood Court, Stillorgan, Co. Dublin, A94 C6Y0

Web: [www.setantaschool.ie](http://www.setantaschool.ie)

Facebook: Setanta School

Principal: Loman Ó Loingsigh

Email: [principal@setantaschool.ie](mailto:principal@setantaschool.ie)

Telephone: 01-2884594

Roll No: 20028K

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## **APPLICATION FORM - SCHOOL YEAR: 2027 – 2028**

**Pupil's Name:**

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**Address:**

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**Date of Birth:**

\_\_\_\_\_

**Parents/Guardians:**

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**Contact Details:**

\_\_\_\_\_

**Email Address:**

\_\_\_\_\_

**Emergency no:**

\_\_\_\_\_

**PPS Number:**

\_\_\_\_\_

**Present School:**

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**Application accompanied by:**

Psychological Assessment ☐

Statement of Diagnosis ☐

School Report ☐

O.T Report ☐

SLT Report ☐

Other ☐

**Please note:** The purpose of the Reports is to assist the school in establishing the educational and training needs of our potential pupils. All information will be treated in confidence.