

**St. Luke's School,
Douglas
Cork**

021 4361388
office@stlukesschool.ie

Notification of Intention to Apply Form

Name of child: _____

Date of Birth: _____

Parent's name (1): _____

Parent's name (2): _____

Telephone number: _____ Mobile number: _____ email: _____

Full postal address (for correspondence): _____

Proposed date of entry to the school: _____ Class: _____

This is not an application form and does not form part of the selection process. The school will make a record of parents wishing to enrol their child/ren for no other purpose than being in a position to post out application forms. .

I/We wish to give notice of our intention to apply for enrolment in respect of _____
to St Luke's School for the year _____ in accordance with the foregoing information and
request that an application form be sent to me/us at the appropriate time.

- I/We understand this notification places the applicant pupil on a list of those requiring enrolment applications for the term and year stated.
- I/We understand that this notification does not offer any preferment to the applicant pupil and does not guarantee any place for him/her either for the term and year requested or for any other term or year.
- I/we understand that it is our responsibility to communicate to the school any change in our correspondence address.

Signed: Parent 1: _____

Parent 2: _____

Date: _____