



**APPLICATION FORM  
FOR ENROLMENT OF CHILD  
IN CRC SCHOOL  
2026 - 2027**

<u><b>Pupil's Details</b></u>	
Name: .....	Date of Birth: .....
Address: ..... ..... .....	PPSN: .....  Nationality: .....
Eircode: .....	Religion: .....  Language Spoken at Home: .....
Male <input type="checkbox"/>	Female <input type="checkbox"/>
<u><b>Mother's Details</b></u>	<u><b>Father's Details</b></u>
Name: .....	Name: .....
Address: ..... ..... .....	Address: ..... ..... .....
Eircode: .....	Eircode: .....
Mobile No: .....	Mobile No: .....
Email: .....	Email: .....
Nationality: .....	Nationality: .....
<p><b>Are there any family circumstances that we should be aware of e.g. separation, care orders, bereavements?</b></p> <p style="text-align: center;"> <input type="checkbox"/> Yes             <input type="checkbox"/> No         </p> <p><b>If you answered yes, these details can be shared confidentially at a later stage.</b></p>	

<b>Physical Disability:</b>						
<b>Additional Disability or medical conditions including epilepsy:</b>						
<b>Sight / Vision:</b>						
<b>Hearing:</b>						
<b>Communication / Speech:</b>						
<b>Mobility:</b> (independent, some support required, full support required)						
<b>Transport:</b> Can sit on a bus seat Uses a car seat Travels in wheelchair Travels in a specialised buggy Other (please explain below)  .....	<table border="1"><tr><td></td></tr><tr><td></td></tr><tr><td></td></tr><tr><td></td></tr><tr><td></td></tr></table>					
<b>Feeding Needs:</b> (independent, some support required, full support required)						
<b>Toileting Needs:</b> (independent, some support required, full support required)						
<b>Use of specialised equipment including communication devices, hoists, stander, specialised seating, walker, medical equipment :</b>						
<b>Medical needs or Medication:</b>						
<b>Additional Information:</b>						

**Details of any Schools/ Preschools / Creches already attended:**

**Name of Current School/Preschool Creche:**

**Current School Principal/ Creche Manager:**

**Current Class Level:**

**Why you would like your child to attend the CRC School :**

.....

.....

.....

.....

**Is your child accessing services from a CDNT team?** ☐ **Yes** ☐ **No**

**If you have answered yes, please name the CDNT team .....**

**Name of CDNT Keyworker .....**

**Please name the professionals your child attends:**

**Consultant: .....**

**Physiotherapist: .....**

**Speech and Language Therapist: .....**

**Occupational Therapist: .....**

**Social Worker: .....**

**Does your child attend a FEDS Clinic?** ☐ **Yes** ☐ **No**

**Parent / Guardian Signature:\_\_\_\_\_**

**Date:\_\_\_\_\_**

**Relationship to the child:.....**

**Please return the following to: CRC School, Vernon Avenue, Clontarf, D03 K298**

**Closing Date for Applications Friday February 13th 2026**

## **Checklist For Parents**

- **Fully completed application form** ☐
- **Copy of birth certificate** ☐
- **Proof of address for child (utility bill within last 6 months)** ☐
- **Professional Report(s) which outline the child's physical disability as the primary disability** ☐
- **Professional Report(s) which outline the child's level of care needs including feeding, toileting, mobility and communication** ☐
- **Professional Report(s) which include a recommendation a special school educational setting** ☐
- **Professional Report(s) which includes a recommendation for additional SNA support where care needs are significant** ☐
- **Professional Report(s) which includes a recommendation that the child travel on school transport** ☐
- **Professional Report(s) which includes a recommendation that the child requires a bus escort while on school transport** ☐
- **Letter of Eligibility for a special school placement from the NCSE for the school year 2026-2027** ☐

Professional reports are required to :

- assist the school in establishing the educational needs and the care needs of the child relevant to his/her disability or special needs;
- inform the NCSE of new enrolments. The NCSE will not approved enrolments without the necessary documentation;
- apply for additional support services where required such as SNA support which is reviewed each year by the NCSE. The level of SNA support allocated is determined by the information outlined in reports.

Additional reports may be requested from parents by the Medical Director and/or the School Principal.

**GDPR: Please note, the CRC School cannot access reports from the CRC Medical Office for children who are not already pupils in the school even if your child is with a CRC CDNT team. Therefore, all required reports *must* be included with this application.**

<b>Official Use Only</b>		
<b>Date Application Received</b>		
<b>All sections of application form completed</b>	<b>Yes</b>	<b>No</b>
<b>Proof of address provided and in date</b>	<b>Yes</b>	<b>No</b>
<b>Within catchment area</b>	<b>Yes</b>	<b>No</b>
<b>Birth certificate provided</b>	<b>Yes</b>	<b>No</b>
<b>Report outlining physical disability</b>	<b>Yes</b>	<b>No</b>
<b>Report outlining care needs</b>	<b>Yes</b>	<b>No</b>
<b>Recommendation for special school setting</b>	<b>Yes</b>	<b>No</b>
<b>Recommendation for additional SNA support</b>	<b>Yes</b>	<b>No</b>
<b>Recommendation for school transport and bus escort</b>	<b>Yes</b>	<b>No</b>
<b>Letter of Eligibility for a special school placement from the NCSE for the school year 2026-2027</b>	<b>Yes</b>	<b>No</b>