



**APPLICATION FORM FOR ENTRY ACADEMIC YEAR 2025-26**

**PRESENTATION COLLEGE BRAY**  
[www.presbray.com](http://www.presbray.com)  
email: [admissions@presbray.com](mailto:admissions@presbray.com)  
Tel: 01-2867517

Office use only

Ref: \_\_\_\_\_

SURNAME:	FIRST NAME:
ADDRESS:	
DATE OF BIRTH: PPS Number:	Student's name as it appears on Birth Certificate:

**PARENT/GUARDIAN CONTACT DETAILS:**

MOTHER/GUARDIAN	FATHER/GUARDIAN
SURNAME:	SURNAME:
FIRST NAME:	FIRST NAME:
Pre-Marriage name if applicable:	TEL:
TEL:	EMAIL:
EMAIL:	EMAIL:
POSTAL ADDRESSES IF DIFFERENT FROM THAT GIVEN FOR STUDENT:	POSTAL ADDRESSES IF DIFFERENT FROM THAT GIVEN FOR STUDENT:

**SCHOOL THAT STUDENT IS CURRENTLY ATTENDING**

SCHOOL NAME & ADDRESS:
SCHOOL ROLL NO: <i>(available from your son's school office):</i>
For entry into 1 <sup>st</sup> year for the Academic Year 2025/26, I confirm that the applicant is currently in 6 <sup>th</sup> class in primary school and will complete 6 <sup>th</sup> class in June 2025 Yes [ ] No [ ]

**Class Being Applied for:**

Mainstream 1<sup>st</sup> year Class for Academic Year 2025-26. [ ]  
and/or  
Special Unit Class for Academic Year 2025—26 [ ]  
(subject to receipt of appropriate clinical/educational psychology report)

**PRIOR LINKS WITH PRESENTATION COLLEGE (if any)**

Please tick the appropriate box

Category 1 [ ] – If you have a son who attends/attended the school or if father/grandfather is past pupil

Category 2 [ ] – If the above does not apply

Year Father/Grandfather left school if past pupil:

Exams taken: Junior Cert [ ] Leaving Cert [ ]

Please indicate Grandfathers name if he was a past pupil:

Names of any brothers who attend/attended the school :

Current Class:

PLEASE RETURN this form to the school by email to [admissions@presbray.com](mailto:admissions@presbray.com) or by post. An email receipt will be returned to you with a reference number. You must quote this number on any correspondence to the school.

**YOU MUST CONTACT THE SCHOOL:**

- If you do not receive a confirmation email with reference number within 1 month of submitting the form
- **If you change address, telephone number or email**

**PLEASE ENCLOSE A COPY OF YOUR SONS LONG FORM BIRTH CERTIFICATE**

This form does not mean that you son has been allocated a place in this school. Your son's name is included in the list from which places are allocated. Places will be allocated October/November when you son is in 6<sup>th</sup> class.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian 1

Signed \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian 2

**N.B. Applications will not be processed without a copy of the BIRTH CERTIFICATE**

**Completed forms must be submitted between 1<sup>st</sup> – 22nd Oct 2024 (4p.m. latest)**

*Applications received after this date will be treated as late applications*

*All of the information provided with this form is required and will be treated confidentially and in line with Data Protection Policies*