



**PRESENTATION SECONDARY SCHOOL, WEXFORD**

**APPLICATION FORM – TRANSFER**

**PLEASE USE BLOCK CAPITALS ONLY**

YEAR GROUP OF ENTRY SOUGHT		
NAME OF STUDENT (Birth Cert)		
DATE OF BIRTH		
PPS NUMBER		
NAME PARENT/GUARDIANS		
ADDRESS		
HOME PHONE NUMBER		
MOBILE NUMBER		
EMAIL ADDRESS		
NAME OF SCHOOL CURRENTLY ENROLLED IN		
YEAR ENROLLED IN CURRENT SCHOOL		
SISTER CURRENTLY IN PRESENTATION WEXFORD	Name	Year Group
SISTER WHO ATTENDED PRESENTATION WEXFORD	Name	Year Graduated
IF APPLICABLE - NAME OF MOTHER IF PAST PUPIL & YEAR LEFT		
SIGNATURE OF PARENT/GUARDIAN		
DATE		

- ❖ *Please attach a copy of recent school reports with your application*
- ❖ *Where the demand exceeds any available places in a particular year group, the principal will apply the selection criteria in the order listed in our Admissions Policy Page 8 under the Procedures for admission of students to other years and during the school year.*
- ❖ *Information provided on this application form will be shared as necessary with the management authorities of other post-primary schools.*

For Office Use Only	Application Received	Receipt Given/Posted
---------------------	----------------------	----------------------

**PLEASE INFORM THE SCHOOL IF ANY OF THE ABOVE DETAILS CHANGE AT ANY TIME**

WHEN REGISTERED AT OUR OFFICE, PRESENTATION SECONDARY SCHOOL,

A COPY OF THIS APPLICATION WILL BE RETURNED FOR YOUR RECORDS

**PLEASE RETAIN A COPY OF THIS APPLICATION FORM AS A RECEIPT**