

ST. PATRICKS ACADEMY, ISLANDEADY, CASTLEBAR, CO. MAYO.

TEL/FAX: (094) 9021782 EMAIL: stpatricksacademy@eircom.net WEBSITE: www.stpatricksacademy.ie

JUNIOR CERTIFICATE APPLICATION



STUDENTS DETAILS

Christian Name(s): _____

Surname: _____

Address: _____

Please attach
photograph.

Date of Birth: _____ / _____ / _____ Nationality: _____

Telephone Numbers: Home: () _____ Mobile 1 : () _____

Work: () _____ Mobile 2: () _____

Email Address: _____

Religion: _____

Hobbies/Interests: _____

Achievements: _____

Date of enrolment: _____ Intended Year: _____

PARENTS DETAILS

Fathers name: _____ Mothers name: _____

Home Address: _____

Fathers occupation: _____

Mothers occupation: _____

Day contact number if both parents are working: (_____) _____

Number of brothers and sisters: _____ Place in the family: _____

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EDUCATION DETAILS

National School: _____

Address: _____

Dates Attended: _____

Secondary School: _____

Address: _____

Dates attended: _____

** (Please tick the appropriate boxes.)*

Religion		General Science		French	
Irish		Art		German	
English		C.S.P.E.		Spanish	
Maths					
History				Home - Economics or	
Geography				Technical Graphics	
Business					

Religion is not exam subject.

Specify any learning difficulties and please attach relevant reports:

Any other information:

Please include a reference from the School Principal, School Chaplain or other suitable person.