



Mount Anville

Montessori Junior School

2½ -12 years

Application Form

Privacy Notice for Parents must be read prior to completing this form

Privacy Statement

Mount Anville Montessori Junior School is a Sacred Heart Catholic English speaking School for girls from 2½ to 12 years with infant boys.

We gather and process your child's personal data for the purposes of administering the education of your child. To facilitate this, we will input your child's data into MAMJS Management Information System, Aladdin. Aladdin is a secure software as a service application which is owned and run by Cloudware Ltd. (T/A Aladdin Schools), from where the data is only processed for the above purpose."

The Information provided to us is treated as confidential to MAMJS. It is important that parents provide us with accurate details and update us in relation to any change in the information provided. We will not give information about your or your child to anyone outside the school without consent unless the law, our Privacy Notice for Parents and our rules allow us to. All information given will be held in the strictest confidence under the requirements of GDPR. Documents will be held in safe and secure storage in compliance with GDPR guidelines. It is necessary to share Section 2 of this information with our Bursar's Office for the administration of fees. Our Information and Consent Form will be issued to you on admission to the school.

Section 1

Child's Surname: _____ First Names: _____

Child's home language if not English: _____

Religion: _____ Child's P.P.S: _____

Date of Birth: _____ Gender _____

Proposed year of entry: _____ Proposed Class

- | | | |
|---------------------------------------------------------------------------------|---|---|
| (a) Montessori Junior / Senior | [|] |
| (b) Preparatory Junior/Senior | [|] |
| (c) 1 ST or 2 nd Class | [|] |
| (d) 3 rd , 4 th , 5 th , 6 th Class | [|] |

Siblings already in the School: _____

Previous School If applicable: _____ Class: _____

If a Parent is Past Pupil please give details: _____

Kindly enter here any relevant information such as, if your child has a physical/ medical condition and / or learning difficulties that the school should be informed about:



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Section 2

(This section will be shared with our Bursar's Office for the administration of school fees)

Contact Details: (please print)

Pupil Name: _____

Parent/ Guardian	Parent/ Guardian
Surname:	Surname:
First Name:	First Name:
Title:	Title:
Address:	Address:
Postcode:	Postcode:
Home phone:	Home phone:
Mobile:	Mobile:
Email: please print:	Email: please print:

Signature of Parent/Guardian: _____

Date: _____

On receipt of this form with a non-refundable Registration Fee of €120.00 and a copy of your child's Birth Certificate your child's name will be entered on a Waiting List. If your child is offered a place, you will be required to complete the Acceptance Form enclosing a non-refundable School Fee Deposit of €750.00 and will be deducted from the first term's fees. Places must be accepted within 7 days of offer.