



Foirm Iarratais / Application Form

Rang Uathachais/ Autism Class 2025-2026

Gaelscoil Osraí

An Pháirc Mhór Theas, Bóthar Uachtar Rátha
Cill Chainnigh R95 AT85

Guthán 056 – 77 65697

Ríomhphost: runai@osrai.com

www.osrai.com

Uimhir Rolla : 19856R

Líon gach cuid den bhfoirm seo le' thoil/Please complete all sections of this form

Ní mór an fhoirm chomhlánaithe seo a bheith faighte ag Gaelscoil Osraí idir 3ú Márta, 2025 agus 21ú Márta, 2025, le go mbreithneofar í le haghaidh iontrála.

This completed form must be received by Gaelscoil Osraí between 3rd March, 2025 and 21st March, 2025, to be considered for admission.

Iarratas ar Rang Uathachais 2025-2026/ Application for Autism Class 2025-2026

Sloinne an Pháiste _____ <i>Child's Surname</i>	Ainm an Pháiste _____ <i>Child's Name</i>
Seoladh _____ <i>Address</i>	
Uimhir Theilafóin _____ <i>Home Phone Number</i>	Dáta Breithe _____ <i>Date of Birth</i>
Uimhir PPS _____ <i>PPS Number</i>	Éircód _____
Náisiúntacht _____ <i>Nationality</i>	Buachaill <input type="checkbox"/> Cailín <input type="checkbox"/> <i>Male Female</i>

Eolas Breise (Additional Information):

An bhfuil diagnóis d'uathachas ag do pháiste? Tá (Yes) Níl (No)
Has your child been formally diagnosed with Autism?

Má tá, cé 'tá freagrach as an measúnú agus cathain a deineadh é?
If yes, who conducted the assessment and when? _____

An bhfuil moladh Rang Uathachais ceangailte le scoil phríomhshrutha sa tuairisc seo? Tá (Yes) Níl (No)
Is there a recommendation for an Autism Class attached to a mainstream school in this report?

An bhfuil aon diagnóis eile ag do pháiste, m.sh míchumas foghlama Tá (Yes) Níl (No)
Has your child a diagnosis of any other disability, e.g. a learning disability

Sonraí Tuismitheora / Caomhnóra (Parents / Gaurdians Details)

Ainm an Athar / Caomhnóra _____
Name of Father / Guardian

Iar Scoláire Is ea (Yes) Ní hea (No)
Past Pupil

Uimhir Theilafóin _____
Mobile Phone Number

Ríomhphost _____
E-mail

Ainm na Máthar / Caomhnóra _____
Name of Mother / Guardian

Iar Scoláire Is ea (Yes) Ní hea (No)
Past Pupil

Uimhir Theilafóin _____
Mobile Phone Number

Ríomhphost _____
E-mail

Cuir tic leis an catagór chlárúcháin a bhaineann le do pháiste./ Please tick the enrolment criteria that applies to your child.

1. Daltaí atá i rang príomhshrutha na scoile
Children who are current pupils of Gaelscoil Osraí.
2. Deartháireacha, deirfiúracha, leath-shiblí, páistí altramaigh nó uchtaithe le daltaí reatha na scoile.
Brothers, sisters, half-siblings, foster or adopted children of current students of the school.
3. Páistí gur deimhin leis an scoil gur ghnóthaigh an dalta leibhéal líofachta sa Ghaeilge, agus gur dhócha go rachadh an líofacht sin ar gcúl, mura ligfí isteach i scoil lán-Ghaeilge é/í.
*Children that the school is satisfied that the student has achieved a level of fluency in Irish, and that that fluency would be likely to regress, if not admitted to an all-Irish school.**
4. Páistí a bhfuil deartháir, deirfiúr, leath-shiblín, siblín altramaigh nó uchtaithe acu a d'fhreastail ar an scoil cheana féin.
Children who have a brother, sister, half-sibling, foster or adopted sibling a of child who has already attended the school.
5. In ord aoise, an páiste is sine ar dtús. *In order of age, oldest child first.*

Ainmneach deartháireacha/deifiúracha atá/ a bhí ag freastal ar Ghaelscoil Osraí.

(First names of older siblings attending/or who have attended attend Gaelscoil Osraí)

Ainm(Name)	Rang (Class)	Dáta Breithe (Date of Birth)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Any other information which the school should be made aware of. _____

Please tick to confirm: Cuir tic le deimhniú:

Tá Teastas Breithe ceangailte agam leis an iarratas seo
 I have attached a Birth Certificate to this application. _____

Tá gach tuarascáil ábhartha ceangailte agam chun cloí leis na critéir iontrála do Rang Uathachaisl
 I have attached all relevant reports to comply with admission criteria for Autism Class _____

Síniú tuismitheora/caomhnóra:/ Signatures of parents/guardians:

Date: _____