

ASSOCIATION OF COMMUNITY AND COMPREHENSIVE SCHOOLS STANDARD SCHOOL APPLICATION FORM (Part 1) for Admission 1st Year 2022/2023 Pobalscoil Chorca Dhuibhne



PLEASE NOTE: FALSE INFORMATION WILL AUTOMATICALLY DISQUALIFY APPLICANT.

Closing date for receipt of application form is 15th November 2021

Data Protection

The personal data required from you on this admissions form (part 1) is required for the purposes of:-

- fulfilling our legal obligation to provide an education to students
- student enrolment and student registration
- allocation of teachers and resources to the school
- school administration
- to fulfil our other legal obligations
- to process appeals, resolve disputes and defend litigation etc.

1. You have the following statutory rights that can be exercised at any time:

- (a) Right to complain to supervisory authority.
- (b) Right of access.
- (c) Right to rectification.
- (d) Right to be forgotten.
- (e) Right to restrict processing.
- (f) Right to data portability.
- (g) Right to object and automated decision making/profiling.

For further information please see our school Data Protection Policy on our website. Should you wish to discuss anything in regard to Data Protection, please contact the Principal via the school office email: em@pcd07.ie

OFFICE	RECEIP	DATE	STAIVIE
	AND	TIME	

1. PERSONAL DETAILS	(required for stage 1 of application process)
Student Surname	
Student First Name	
Home Address	
	EIRCODE:
County	
Date of Birth	
Birth Cert Attached	Yes □ No □ (Please tick √ appropriate box)
Birth Certificate Forename (if different to above)	
Birth Certificate Surname (if different to above)	
Mother's Maiden Name	

2. EDUCATIONA	AL DETAILS (required for stage 1 of applicat	ion process)			
NAME OF PRIMARY SCH (currently attending)	OOL				
ADDRESS OF PRIMARY S (currently attending)	SCHOOL				
Roll Number of Primary (currently attending)	School				
3. FAMILY DETAILS (REQUIRED FOR SCHOOL ENROLMENT AND PARENTAL CONTACT PURPOSES)					
	Parent/Guardian 1	Parent/Guardian 2			
Surname					
Name(s)					
Relationship to child (mother/father/o ther guardian)please provide details					
Phone Number					
Mobile Number for Messaging from School					
Please indicate <u>ONE</u> number to which text messages will be sent. Mobile Nr : Please make sure the School is aware of any change in your mobile number. This is essential for texting purposes.					
Contact E-mail Address					
Postal Address (if different from above)					
CORRESPONDEN CE SHOULD BE ADDRESSED TO	Mother				
	State above Correspondence title i.e. Mr. & Mrs/	/Mrs/Mr + specify surname).			

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Name(s) of PAST PUPILS (brother(s) and/or sisters) who attended this school and year of completion at the school.	
Does the child have any Brothers/Sisters currently attending this school?	Name, Age, Class/Year
	Name, Age, Class/Year
	Name, Age, Class/Year

"I DECLARE THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT"					
Signature:	Parent/Guardian	Date:			
PRINT NAME:					

CHECKLIST - Have you enclosed:-

ORIGINAL Birth Cert of student (for photocopying by our office).

Ticked the boxes and signed all relevant sections. Enclosed 2 original (different) current Utility Bills of home address i.e. Electricity, Gas, Landline Phone bill, ONLY (to be presented for photocopying by our office staff).

Failure to complete form fully and supply all necessary documentation will deem application invalid.

If/when a letter of offer is issued, we will require further information with regard to your son/daughter (i.e. part 2 of the Admissions Application must be completed fully and returned to the school – this form will be enclosed with the letter of offer).