Part 1

ASSOCIATION OF COMMUNITY AND COMPREHENSIVE SCHOOLS STANDARD SCHOOL APPLICATION FORM Admission 1st Year 2024/2025

[insert school name and logo here]

PLEASE NOTE: FALSE INFORMATION WILL AUTOMATICALLY DISQUALIFY APPLICANT. PLEASE FILL OUT DETAILS IN BLOCK CAPITALS

Closing date for receipt of application form is [DATE AND TIME]

 Data Protection The personal data required from you on this admissions form (part 1) is required for the p 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 	urposes of:-
 to process appeals, resolve disputes and defend litigation etc. 	
 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 [link].Should you w Protection, please contact the Principal 	OFFICE RECEIPT DATE STAMP AND TIME
via the school office email [email]	

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 v appropriate box)			
Birth Certificate Forename (if different to above)				
Birth Certificate Surname (if different to above)				
Mother's Maiden Name				
2. EDUCATIONAL DETAILS (required for stage 1 of application process)				
NAME OF PRIMARY SCHOOL (currently attending)				
ADDRESS OF PRIMARY SCHOOL (currently attending)				

Ρ	Part 1				
	Roll Number of Primary School				
	(<u>currently</u> attending)				

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/other 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)					
CORRESPONDENCE SHOULD BE ADDRESSED TO	Mother OR Father OR Both parents/guardians State above Corresponde	nce title i.e. Mr. & Mrs/Mrs/Mr + specify surname).			
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	Name, Age, Class/Year				
any Brothers/Sisters currently attending	Name, Age, Class/Year				
this school?	Name, Age, Class/Year				

"I DECLARE THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT"				
Signature:	Parent/Guardian		Date:	
PRINT NAME:				
		2 of 2	If/when a letter of offer is issued, we will require further information with regard to your	

CHECKLIST - <u>Have you enclosed:-</u> 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.