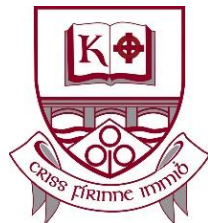


St. Kilian's Community School



Application for Admission to 1st Year 2025/2026

PLEASE NOTE: FALSE INFORMATION WILL AUTOMATICALLY DISQUALIFY APPLICANT.

PLEASE FILL OUT DETAILS IN BLOCK CAPITALS

Thank you for completing Part 1 of the enrolment process.

This Admissions form (Part 2) is to be completed by a father/mother/legal guardian of the 6th class student. At least one parent/legal guardian must sign the form.

This form must be fully completed (including all supporting documentation where relevant) in order for the enrolment process to be complete.

Closing date for receipt of completed Application Form (Part 2) is Friday, November 29th 2024

Data Protection

The personal data required from you on this admissions form (part 2) is required for the purposes of:-
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, or should you wish to discuss anything in regard to Data Protection, please contact the Principal via the school office email : [\[email\]](#)

Please ensure sure that you read the Data Protection Policy available on the school's website.

Please read the Department of Education (DE) Personal Data Fair Processing Notice here in relation to personal data we are legally obliged to share with DES <https://www.gov.ie/en/circular/f5adff-fair-processing-notice-to-explain-how-the-personal-data-of-students/>

1. PERSONAL DETAILS (required for part 2 of application process)

Student Surname:	
Student First Name:	
Gender:	
Mother's Maiden Name:	
Mother Tongue/First Language:	
Ethnicity/Cultural Background:	
Home Address and Eircode:	

ACCESS TO/CUSTODY OF STUDENT If there are any orders or other arrangements in place governing access to or custody of the student, please provide details.	NAME: _____ RELATIONSHIP TO STUDENT: _____ ADDRESS: _____ CONTACT NUMBER: _____
PPS NUMBER: _____	
EMERGENCY CONTACT DETAILS (Not Parent/Guardian listed above)	Name: _____ Contact Number: _____ Relationship to Student: _____

2. MEDICAL DETAILS

(required to ensure the school has an accurate record of medical conditions including your doctor's contact details in the event of a medical issue arising during school activities. Please note it may be necessary to disclose this information to school staff in certain circumstances, if your child has a medical condition requiring the administration of medication during school time. Please provide (on a separate sheet) accurate and up-to-date information/instructions with regard to administration of medicines if required.)

- Does Student require Glasses? Yes ☐ No ☐
- Does Student have any Hearing Difficulties? Yes ☐ No ☐
- Does Student suffer any Serious Illness? Yes ☐ No ☐
- If Yes, please specify: _____
- Is Student on any ongoing Medical Treatment? Yes ☐ No ☐
- Has Student any allergies, if so please specify/state : _____
- Does Student have any of the Chronic Conditions? Yes ☐ No ☐
- If Yes, please provide details Other Medical concerns/information of relevance/Procedures to follow for a particular illness on a separate sheet.
- GP Name, Address & Contact Number: _____
- _____

3. EDUCATIONAL DETAILS

(required for part 2 of application process)

(required to ensure the school has an accurate record of educational details in order that we may provide the appropriate level of support if required.) Please note it may be necessary to disclose this information to school staff in certain circumstances.

- Does your child have an exemption from Irish in National School? Yes ☐ No ☐
(If Yes, please attach DES Certificate).
- Has the student had a psychological assessment? Yes ☐ No ☐
If Yes, is the psychological report available? Yes ☐ No ☐
Date of psychological assessment (please enter in format xx/xx/xxxx): ____/____/____
Copy of psychological assessment enclosed Yes ☐ No ☐
- Has the student been granted resource teaching hours by the National Council for Special Education (NSCE)? Yes ☐ No ☐
- Has the student availed of the services of a Special Needs Assistant (SNA) granted by the NCSE? Yes ☐ No ☐
- Has the student been in receipt of learning support at Primary School? Yes ☐ No ☐
If Yes, please provide details below:

- State your child's general interests/hobbies/other relevant information:

4. STANDARDISED TESTING & REPORTS ON EDUCATIONAL PROGRESS

Standardised testing may be carried out for the purposes of Literacy/Numeracy progress, Reasonable Accommodations in the State Examinations, assisting in referrals to NEPS and for Career Guidance information etc.

Consent for Standardised Testing:

"I/we give permission to the School to conduct standardised testing for the purposes of Literacy/Numeracy progress, Reasonable Accommodations in the State Examinations, assisting in referrals to NEPS and Career Guidance information"

Signed: _____ Signed: _____ Date: __/__/____
Parent/Guardian Parent/Guardian

REPORTS ON EDUCATIONAL PROGRESS

Please indicate the person to whom correspondence is to be sent regarding educational progress/attainment of the student, if different from details already supplied by you in Form Part 1 and listed as "correspondence title" on offer document attached.

Name: _____ Relationship to Student: _____

Address: _____

Contact Number: _____

5. COMPLIANCE WITH SCHOOL POLICY

I/we understand, accept and agree to the aims and rules of the School as stated in the school's Admission Policy ([https://stkilianscs.com/cmsAdmin/uploads/stkcs-admission-policy-\(-913761\)-september-2024.pdf](https://stkilianscs.com/cmsAdmin/uploads/stkcs-admission-policy-(-913761)-september-2024.pdf)) and stated in the Code of Behaviour (<https://stkilianscs.com/cmsAdmin/uploads/code-of-behaviour-september-2024.pdf>) (attached and signed by Parent/Guardian and Student).

I agree to monitor my child's progress through the school journal.

Signed: _____
Parent/Guardian

Signed: _____
Parent/Guardian

CHECKLIST

The signature of at least one parent/legal guardian is required.

- I/we enclose two passport size photos, either now or with Part 1 of the form. ☐
- I/we enclose the Code of Behaviour – read and signed by Parents/Guardians and Student ☐
- I/we have fully completed all sections of and signed this Part 2 form (including PPS No.). ☐
- I/we enclose a DE Certificate of Irish Exemption (if applicable). ☐
- I/we enclose a copy of Educational/Psychological Report(s) (if applicable). ☐
- I/we enclose Medical/Health information and details of medication/treatment (if relevant). ☐

Signed: _____
Parent/Guardian

Signed: _____
Parent/Guardian