Coláiste Cholmcille

SCHOOL APPLICATION FORM for Admission 1st Year 2022/2023

PLEASE NOTE: FALSE INFORMATION WILL AUTOMATICALLY DISQUALIFY APPLICANT.

PLEASE FILL OUT DETAILS IN BLOCK CAPITALS

Closing date for receipt of application form is Friday 07th January 2022 at 4pm

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.

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

- (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 http://ccbs.ie/wp-content/policies/CCBS-Data-Protection-

Guidelines.pdf Should you wish to discuss anything in regard to Data Protection, please contact the Principal

via the school office email : info@ccbs.ie

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

OFFICE RECEIPT DATE STAMP AND TIME

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				
Mobile No:	er to which text messages will be sent. ol is aware of any change in your mobile numb	er. This is essential for texting purposes.		
Contact E-mail Address				
Postal Address (if different from above)				
CORRESPONDENCE SHOULD BE ADDRESSED TO	Mother	e 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

PRINT NAME:

CHECKLIST - <u>Have you enclosed:-</u> ORIGINAL Birth Cert of student (for photocopying by our office). Ticked the boxes and signed all relevant sections. 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).
letter of offer).

Date: _____