**[](http://www.tipperaryetb.ie/)**

**APPLICATION FORM FOR ADMISSION - 2019/2020**

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| ***This is an application form is for admission and does not constitute***  ***an offer of a place, implied or otherwise.*** | |
| **Completed applications will be accepted from:** | 30/11/18 |
| **The closing deadline for receipt of application is:** | 18/12/18 |

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| Please complete all sections of the following application using BLOCK CAPITALS | | | | | | | | | | | | | | | | |
| SECTION 1 - APPLICANT DETAILS | | | | | | | | | | | | | | | | |
| *Details of the young person for whom this application is being made.* | | | | | | | | | | | | | | | | |
| First Name: |  | | | | | | | | | | | | | | | |
| Middle Name: |  | | | | | | | | | | | | | | | |
| Surname: |  | | | | | | | | | | | | | | | |
| Address: |  | | | | | | | | | | | | | | | |
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| Eircode: |  | | | | | | | | | | | | | | | |
| PPSN: |  |  | |  | |  | |  | |  | |  | |  | |  |
| Date of Birth: | **Day** | | | | **Month** | | | | **Year** | | | | | | | |
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| Proposed Yr-Group | **(*e.g.* First Year, Second Year etc*)*** | | | | | | | | | | | | | | | |

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| SECTION 2 – DETAILS OF PARENT/GUARDIAN | | | | | | | | | | | | | | | | | | | | |
| *This section is NOT required to be completed where the Applicant is over 18, unless s/he wishes the school to communicate with his/her parent/guardian. The information is sought for the purposes of making contact about this application. If more than one name is given but the address is the same, only one letter will issue and will be addressed to both individuals.* | | | | | | | | | | | | | | | | | | | | |
|  | **Parent / Guardian 1** | | | | | | | | | | **Parent / Guardian 2** | | | | | | | | | |
| Prefix: (*e.g.* Mr. / Ms. / Ms. etc) |  | | | | | | | | | |  | | | | | | | | | |
| First Name: |  | | | | | | | | | |  | | | | | | | | | |
| Surname: |  | | | | | | | | | |  | | | | | | | | | |
| Address: |  | | | | | | | | | |  | | | | | | | | | |
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|  | | | | | | | | | |  | | | | | | | | | |
| Eircode: |  | | | | | | | | | |  | | | | | | | | | |
| Telephone no. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Email address: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Relationship to Applicant |  | | | | | | | | | |  | | | | | | | | | |

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| **SECTION 3 – ASD SPECIAL CLASS** |
| The *ASD Special Class* in Comeragh College teaches students who have the following special educational needs: Autism Spectrum Disorder. Please ONLY tick if you are applying for the ASD class. |
| Please confirm if this application is being made for:  The ASD class only: 🞎 |

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| **SECTION 4 – ADMISSIONS CRITERIA** |
| *This information will assist in determining whether the Applicant meets the admission requirements. The list of questions is not in order of priority.* |

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| 1. **If the Applicant currently has any siblings in this school, please indicate their names and current year of study.** | |
| 1. **Name:** |  |
| **Year:** |  |
| 1. **Name:** |  |
| **Year:** |  |
| 1. **Name:** |  |
| **Year:** |  |
| 1. **Name:** |  |
| **Year:** |  |

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| 1. **If the Applicant has previously had any siblings in this school, please indicate their names and years of attendance.** | |
| 1. **Name:** |  |
| **Year(s):** |  |
| 1. **Name:** |  |
| **Year(s):** |  |

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| 1. **Please provide details of the Primary School attended by the Applicant.** | |
| **School name:** |  |
| **School address:** |  |
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| 1. **Please confirm that the Code of Behaviour is acceptable to you and you shall make all reasonable efforts to ensure compliance by the Applicant if s/he secures a place in the school. Please note that the Code of Behaviour can be found at www.comeraghcollege.ie or from the school office.** |
| **I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm that the Code of Behaviour for the school is acceptable to me and I shall make all reasonable efforts to ensure compliance by the Applicant if s/he secures a place in the school.**  OR, in the case where the Applicant is over 18 years of age:  **I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm that the Code of Behaviour for the school is acceptable to me and I shall ensure my compliance with the Code if I secure a place in the school.** |

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| **IMPORTANT INFORMATION:**   * **You are required to submit: An original long birth-certificate** * **All of the information that you provide in this application form is taken in good faith. If it is found that any of the information is incorrect, misleading or incomplete, the application may be rendered invalid.** * **Please understand that it your responsibility to inform the school of any change in contact information or circumstances relating to this application.** * **Please sign below to demonstrate that you have read and understood this information.** * **All applications and accompanying documentation should be sent no later than 3pm Tues Dec 18th, 2018 to:**   **Comeragh College, Tinvane, Carrick on Suir, Co. Tipperary** |

**(Parent / Guardian 1) (Date)**

**(Parent / Guardian 2) (Date)**

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| **FOR COMPLETION BY SCHOOL ADMINISTRATION ONLY** | |
| **Date** | **School Stamp** |
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| **DATA PROTECTION** |
| The Board of Management of Comeragh College is a committee of Tipperary ETB. Tipperary ETB is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for Tipperary ETB is Bernie Harty and can be contacted at Tipperary ETB, Church Road, Nenagh, Co. Tipperary 067 31250.  The personal data supplied on this Application Form is required for the purpose of:   * Assessment of admission criteria; * Allocation of teachers and resources to the school; and * School administration,   All of which are tasks carried out pursuant to various statutory duties to which Tipperary ETB is subject. The processing of the personal data supplied on this Application Form is therefore carried out in line with Article 6(c) of the General Data Protection Regulation.  Failure to provide the requested information may result in the application being deemed invalid and an offer of a place may not be made.  The personal data provided in this Application Form will be kept for 7 years from the date on which the Applicant turns 18 years of age, unless there is a statutory requirement to retain some or all elements of the data for a further period or indefinitely, in line with Tipperary ETB’s Data Retention Policy, which can be found at [www.tipperaryetb.ie](http://www.tipperaryetb.ie) A copy of the full Tipperary ETB Data Protection Policy is available at [www.tipperary.etb.ie/about-us/data-protection/](http://www.tipperary.etb.ie/about-us/data-protection/) or from the school office.  Any person who provides personal data through this Application Form has a right to request access to that data. S/he also has a right to request the changing of any information if it is factually incorrect. A request for erasure of the data can also be made by or on behalf of the data subject but this will only be acceded to where the data is no longer necessary for the purpose for which it was collected and where Tipperary ETB does not have a legal basis for retaining it.  If you as a data subject have any complaints regarding the processing of your personal data, you have the right to lodge a complaint with the Data Protection Commission. |