



Castlerea Community School

Tel: (094) 9620177 / 9621013 Fax: (094) 9621016

Student Enrolment Application form 2018 / 2019

Entry Year Group:

1st Year 2nd Year 3rd Year TY
5th Year LCA1 6th Year LCA2 SEN

Name of applicant: _____

Part 1: Student's Personal Details

Student's Forename: _____

Student's Surname: _____

Student's Date of Birth: _____

Student's PPS number: _____

Student's Nationality: _____

Student's Religion: _____

Mother's Full Name: _____

Father's Full Name: _____

Student's Present Postal Address:

Second Parent's Postal Address (if different)

Mother's Maiden Name: _____

Names of Siblings already enrolled in Castlerea Community School:

Name: _____

Year: _____

Name: _____

Year: _____

Part 2: Student's Medical Details

Name of student's G.P: _____ G.P Telephone No. _____

G.P Address: _____

Is your child on medication or under medical supervision? Yes No

If yes, please give details: _____

Is the student a holder of a Medical Card? Yes No

Part 3: Student's Educational Details

Name of previous school: _____

Address of previous school: _____

Telephone number: _____ Last date of attendance in previous school: _____

*Details of Special Education Needs, including support measures which have been previously availed of, eg. Resource hours, assistive technology

**Does the applicant have an official Department of Education and Skills Irish Exemption?

Yes No (If yes, please enclose copy of official Exemption Certificate)

Part 4: Additional Information

Please state any relevant family information which you feel the school should be aware of (eg. in foster care, bereavements etc.) including any special interests / achievements that your child has.

Part 5: Contact Details

Mother's Home Tel. _____

Father's Home Tel. _____

Mother's Work Tel. _____

Father's Work Tel. _____

Mother's Mobile Tel. _____

Father's Mobile Tel. _____

Mother's email _____

Father's email _____

Number to be used for texting purposes: _____

Part 6: Declaration

I _____, *(Please print parent/guardian name)* have read and fully understand the Code of Behaviour and the Admissions Policy of Castlerea Community School (copies are available by request from the school, or on the school website). I hereby accept these policies in their entirety and together with my son/daughter/care will adhere to all their principles in full. I declare that information I have given on this form is true and accurate. I have attached all relevant reports necessary to complete the application and understand that failure to provide all necessary documentation will result in my application being deemed incomplete until such time that the documentation becomes available. I am aware that an untrue statement on this or subsequent forms could lead to the withdrawal of any offer of a place or the removal of the applicant from the school.

Signature of parents/guardians:

Mother: _____

Father: _____

Guardian: _____

Date: _____

Part 7: Check-list

- Fully completed application form
- Academic, Discipline and Attendance Report/s from previous school
- Birth Certificate - long form
- Proof of PPS number
- * SEN reports / psychological assessments (if applicable)
- ** Proof of Irish Language Exemption (if applicable)

Photograph Opt In/Out:

From time to time, students may be photographed for the purposes of highlighting achievements / school promotion. Please indicate if you consent for your child's photograph to be taken and used by the school for these purposes only:

Yes No