

APPLICATION FORM FOR ADMISSION – 2021/2022

This is an application form for admission and does not constitute an offer of a place, implied or otherwise. Use of the word ‘student’ throughout this Application Form does not imply that the person on whose behalf this application is being made is regarded as having been accepted as a student of Creagh College.

Completed applications will be accepted from:	[06/10/2020]
The closing date for receipt of applications is:	[02/11/2020]

All Application Forms and accompanying documentation should be sent to:	For office use only
<p>The Enrolment Officer Creagh College Creagh Gorey Co. Wexford, Y25 V6Y9</p>	<p>Date received: ____/____/____ School Stamp:</p>

Please ensure you return the following documents to the school to complete the application:

If applying for the Special Class, a Relevant Report completed within the previous 12 months.

Please tick the Year Group the student is applying to enter:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> First Year | <input type="checkbox"/> Transition Year | <input type="checkbox"/> Sixth Year |
| <input type="checkbox"/> Second Year | <input type="checkbox"/> Fifth Year | <input type="checkbox"/> LCA 2* (Sixth Year) |
| <input type="checkbox"/> Third Year | <input type="checkbox"/> LCA 1* (Fifth Year) | |

*LCA = Leaving Certificate Applied

If you selected LCA (Fifth Year) or LCA (Sixth Year) above, please also confirm if this application is being made for:

LCA only: OR LCA or the mainstream Year Group:

Please complete all sections of the following application using **BLOCK CAPITALS**

SECTION 1 - PROSPECTIVE STUDENT DETAILS

Details of the young person for whom this application is being made.

*First Name:	
Middle Name:	
*Surname:	
*Gender: M/F	
*Nationality:	
*Student Address:	
*Current Primary School:	
*Eircode:	
PPSN:	<input type="text"/>
*Date of Birth:	<input type="text"/> / <input type="text"/> / <input type="text"/>

SECTION 2 – DETAILS OF PARENT/GUARDIAN

This section is NOT required to be completed where the student is over 18 unless s/he wishes the school to communicate with his/her parent/guardian about this application instead of directly with the student. 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:		
*Maiden Name:		
Relationship to student:		

Address:		
Eircode:		
Telephone no.		
Email address:		

SECTION 3 – CODE OF POSITIVE BEHAVIOUR

Please confirm that the Creagh College Code of Positive Behaviour is acceptable to you as a parent/guardian and that you shall make all reasonable efforts to ensure compliance of same by the student if s/he secures a place in the school. Please note that the Code of Behaviour can be found at www.creaghcollege.ie/policies/ or from the school office.

I _____ confirm that the Code of Behaviour for the school is acceptable to me as the student's parent/guardian and I shall make all reasonable efforts to ensure compliance by the student if s/he secures a place in the school.

I also confirm that the student poses no risk to the health and safety of staff or other students nor poses a significant risk to the rights of other students to an appropriate education and has not done so in the past.

SECTION 4 – SPECIAL CLASS

*The special class in Creagh College teaches students who have one or more of the following special educational needs: [Autism Spectrum Disorder]
Please ONLY complete if you are applying for the special class.*

Please confirm if this application is being made for:

The special class only: **OR** The special class and/or the mainstream year group:

Where the student is seeking a place in the special class, please provide details below of the special educational need(s) of the student. A Relevant Report confirming the special educational need and the recommendation for the special class, completed within the last 12 months, must also be provided to the school with this Application Form so as to be considered for admission to the special class.

Please note: as per the school's Admission Policy, eligibility for the special class is subject to the Student having needs which fall within the category of special educational needs provided for by the special class and for transfer students, is subject to there being a place available in the relevant year group.

Details of special educational need: _____

SECTION 5 – SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION

This information will assist in determining whether the student meets the admission requirements in accordance with the order of priority as set out in the applicable section of Part B of the Admission Policy for Creagh College.

A. Please confirm the student's address for the purpose of determining whether s/he resides in the catchment area.

Address:	

B. If the student currently has any siblings in this school, please indicate their names and current year of study.

(i) Name:	
Year:	
(ii) Name:	
Year:	

C. If the student has had any siblings who were previously enrolled in and attended this school, please indicate their names and years of attendance.

(i) Name:	
Year(s):	
(ii) Name:	

Year(s):	
-----------------	--

IMPORTANT INFORMATION:

- 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.
- For information regarding how your data is processed by the school and WWETB, please see overleaf.
- Please sign below to demonstrate that you have read and understood this information.

***NOTE:** Should the student receive a place in Creagh College, there is no guarantee that the student will be assigned his/her selected subject choice due to resource issues and/or restrictions on the numbers of students per class.*

Signatures:

Parent / Guardian 1

Date

Parent / Guardian 2

Date

Student [where over 18]

Date

OFFICE USE ONLY	
Date Application Received:	
Checked by:	
Date entered on School Database:	
Entered by:	

DATA PROTECTION

The Board of Management of Creagh College is a committee of WWETB, Waterford and Wexford Education and Training Board, Ardavan Business Park, Ardavan, Co. Wexford Y35 P9EA, which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for WWETB is Ms. Geraldine O’Gorman and can be contacted at dataprotectionofficer@wwetb.ie.

The personal data supplied on this Application Form and the accompanying documentation sought is required for the purpose of:

- Verification of identity and date of birth;
- Verification and 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 WWETB is subject.

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 disclosed in this Application Form may be communicated internally within WWETB for the purpose of determining the applicability of the selection criteria and possibly with the patron or board of management of other schools in order to facilitate the efficient admission of students, pursuant to section 66(6) of the Education Act 1998 as inserted by section 9 of the (Admissions to Schools) Act 2018.

The personal data provided in this Application Form will be kept for 7 years from the date on which the student 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 WWETB’s Data Retention Policy, which can be found at www.waterfordwexford.etb.ie/wp-content/uploads/sites/24/2014/12/Records-Management-Policy.pdf.

A copy of the full WWETB Data Protection Policy is available at www.waterfordwexford.etb.ie/information-compliance/wwetb-policies/ 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 WWETB 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.