

Application Form for Admission to 1st year August 2024

Failure to return completed application by 12 noon on Friday 27th October 2023 will mean that the application will be deemed as a 'Late Application'.

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 a having been accepted as a student of St. Farnan's PPS, Prosperous.

Fully completed and signed Application Form .	office to complete this application:
Two identical passport sized photographs of the student &	a COPY of student's Birth Certificate.
Recent proof of address (only registered utility bills or ba	
months and in the name of the parent(s)/guardian(s) will be	e accepted).
Application Form - School Copy	For office use only: #
To be retained in the Main Office,	
St Farnan's Post Primary School	Date received://202
	Dated School Stamp:
Student Name:	
Parant/Cuardian nama	
Parent/Guardian name:	Signature of St Farnan's staff accepting
Name of person delivering application (if not	Application Form:
parent/guardian):	
<	
Application Forms Receipt – Parent/Guardian copy	
	For office use only
Application Forms Receipt – Parent/Guardian copy	For office use only
Application Forms Receipt – Parent/Guardian copy Please keep safe.	For office use only Date received:/202
Application Forms Receipt – Parent/Guardian copy Please keep safe.	For office use only
Application Forms Receipt – Parent/Guardian copy Please keep safe. This section to be handed back to parent/guardian/etc.	For office use only Date received:/202
Application Forms Receipt – Parent/Guardian copy Please keep safe. This section to be handed back to parent/guardian/etc. Student Name:	Por office use only Date received://202 Dated School Stamp:
Application Forms Receipt – Parent/Guardian copy Please keep safe. This section to be handed back to parent/guardian/etc.	For office use only Date received://202 Dated School Stamp: Signature of St Farnan's staff accepting
Application Forms Receipt – Parent/Guardian copy Please keep safe. This section to be handed back to parent/guardian/etc. Student Name: Parent/Guardian Name:	Por office use only Date received://202 Dated School Stamp:
Application Forms Receipt – Parent/Guardian copy Please keep safe. This section to be handed back to parent/guardian/etc. Student Name:	For office use only Date received://202 Dated School Stamp: Signature of St Farnan's staff accepting







APPLICATION FORM FOR ADMISSION TO 1st YEAR - 2024/2025

Please complete all sections of this form using BLOCK CAPITALS											
SECTION 1 – PROSPECTIVE STUDENT DETAILS											
Details of th	e young person applying for a place to St. Farnan's for 1st year August 2024										
First Name:						(Mic	ddle N	Name	2:)		
SURNAME:											
Sex: [tick one]	Male Female										
Date of Birth of	Da	ıy		Month					Ye	ar	
student:						2	2	0)		
Current											
Address:	County:										
	Eircode (m	nust be in	cluded)	:							
PPSN:											
Please tick the Primary School currently being attended (6 th class) by the applicant. OTHER SCHOOL:	Allen Nati Allenwoo Coill Dubi Robertsto Scoil an Li Staplesto Timahoe Name of c Address of	d Nation Nations own Nations inbh Íosa wn National urrent Pr	al Schoo al Schoo onal Sch , Prosp onal Sch School imary So	ol hool erous hool							
Applying for:	Mai	nstream s	school	A	SD U	nit		M	odera	te Learn	ing Unit
Mother's Maiden Name:	(needed for	Departmer	t of Educ	ation Esine	et/Ppo	od sys	stem)				

SECTION 2 – DETAILS OF PARENT/GUARDIAN/NEXT OF KIN This information is sought for the purposes of making contact in the event of an emergency or in relation to school matters, e.g. meetings, closures etc. Please PRINT Names Parent/Guardian/Next of Kin 1 Parent/Guardian/Next of Kin 2 First Name: Surname: Full Address & Eircode: Mobile phone no. Email address: Relationship to student: If there are any orders or other arrangements in place relating to access to or custody of the

SECTION 2A – OTHER EMERGENCY CONTACT						
Name:						
Relationship to student & Contact telephone number:		Phone:				
Name:						
Relationship to student & Contact telephone number:		Phone:				

student, please provide details:

Information for all Applicants

from St. Farnan's

Admission to School Policy 2024-2025 – page 15

please see website for policy details https://www.stfarnans.ie/enrolment/

St. Farnan's Post Primary School prioritizes students with siblings currently attending St. Farnan's (and those who currently live in the catchment with siblings who previously attended St. Farnan's) and also students who currently live in our local catchment area and attend one of our seven prioritized 'feeder' primary schools.

Our *local catchment area* comprises of the villages and surrounding areas of (in alphabetical order):

Allen
Allenwood
Coill Dubh
Donadea
Kilmeague
Prosperous
Robertstown
Staplestown
Timahoe

The 'feeder' primary school for St. Farnan's Post Primary School are (in alphabetical order):

Allen National School
Allenwood National School
Coill Dubh National School
Robertstown National School
Scoil an Linbh Íosa, Prosperous
Staplestown National School
Timahoe National School

MAINSTREAM SCHOOL: PLEASE COMPLETE THIS SECTION FULLY (in case of oversubscription). All information provided will be fully checked. As part of our Admission to School Policy, page 15 Section 5.1.1.1 to 5.1.1.7, please answer ALL sections below: The student applying to St. Farnan's currently has siblings enrolled in St. Farnan's: YES NO If YES, please state the name and year group of the current students in St. Farnan's Name: _____ Current Year Group: _____ Name: _____ Current Year Group:_____ The student applying to St. Farnan's previously had siblings enrolled in St. Farnan's and the applicant must be currently living in the catchment area. YES NO If YES, please state the name of the former student/s in St. Farnan's Name: ______ Year finished in St. Farnan's : _____ Name: ______ Year finished in St. Farnan's :_____ Each name provided here will be checked on the Dept. of Education Esinet/Ppod system The student applying to St. Farnan's **resides in the Catchment Area AND attends 6th class in a feeder primary school** as outlined on page 3 of this application form. NO The student applying to St. Farnan's is a child of a current KWETB staff member working in St. Farnan's NO YES The student applying to St. Farnan's is currently residing in the Catchment area **BUT DOES NOT** attend a 'feeder' primary school NO YES The student applying to St. Farnan's currently attends a 'feeder' school **BUT DOES NOT** reside in the Catchment area YES NO The student applying to St. Farnan's previously had parents who attended St.Farnan's PPS YES NO Name: ______Final Year in St. Farnan's: __ _ _ _ The student applying to St. Farnan's does NOT meet any of the above criteria YES NO

ASD & MLU Special Class Units ONLY: PLEASE COMPLETE THIS SECTION FULLY IF YOU ARE APPLYING FOR A SPECIAL CLASS SPACE (in case of oversubscription). Information on page 30 of our Admission to School Policy 2024-2025. All information provided will be fully checked. As part of our Admission to School Policy, page 15 Section 7.1.2.1 to 7.1.2.8, please answer ALL sections below.

	-	ion provided will be fully checked I to 7.1.2.8, please answer ALL se	•
	, , , ,	eeds suitable to be enrolled in the	
YES		NO	
•	•	state that a placement in an ASD	or an MLU class
within	a mainstream school is neces	sary (and not a special school).	
YES		NO	
The student applying to St. AND attends a special clas		iously**) has/had siblings enroll	ed in St. Farnan's
YES		NO	
*Name/s:	Current year Group:		
**Name/s:	Final year: 20	_	
	Farnan's currently* (or previous BUT NOT in a 'feeder' school	iously**) has/had siblings enroll ol:	ed in St. Farnan's
YES		NO	
*Name/s:	Current year Group:_		
**Name/s:	Final year: 20	-	
• • • •	Farnan's is currently residing	in the Catchment area BUT DOE	S NOT attend a
'feeder' primary school YES		NO	
The student applying to St. BUT NOT in a 'feeder' scho	•	the Catchment area AND attend	ls a special class
YES		NO	
The student applying to St. outside the Catchment are		special class in a 'feeder' school	BUT resides
YES		NO	
All other Applicants from spe	cial units outside of the prioritize	ed schools and residing outside the C	Catchment area
YES		NO	

EDUCATIONAL DETAILS

Required for the assessment of individual educational needs

Pursuant to sections 20 and 28 of the Education (Welfare) Act 2000, the school may also receive educational records of the student from a school(s) previously attended by the student.

Irish Language Information					
Is the student currently studying Irish?	Yes		No		
If you answered no, please outline the reason why, e.g. exemption: Please attach exemption certificate, if available.					

Resource and Special Educational Needs information for Mainstream 1 st year							
Does the student have any special educational needs?	Yes		No				
If you answered YES, please give details of the special educational need.							
Has the student been in receipt of learning support or resource hours in his/her primary school?	Yes		No				
If yes, for how many years:							
Has the student received EAL (<i>English as an Additional Language</i>) support?	Yes		No				
If yes, for how many years:							
Other relevant information							
Please provide details of any other education related information regarding the student which you deem appropriate to share with the school? (<i>i.e.</i> Psychologist, Speech & Language Therapist, Occupational Therapist, Social Worker, <i>etc.</i>). You may attach copies of any recent educational/psychological reports or email them to us at a later date:							

Note: Entry Requirements to ASD Class (Room 25) & Moderate Learning Unit (Room 26)

Where the student is seeking a place into our special classes, 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 24 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 either of our special classes and as confirmed by the NCSE.

SECTION 5 - MEDICAL DETAILS

The following information is requested in the event of a medical issue arising during school activities. Please note it may be necessary to disclose this information to staff in certain circumstances in the vital interest of the student.

Please tick as appropriate	Yes	No	If yes, please provide details
Does the student require glasses?			
Does the student have hearing issues?			
Does the student have allergies?			
Does s/he suffer from any medical condition that we should know about? For example, asthma, diabetes, epilepsy, etc.			
Is the student on long term medication of which the school needs to be aware?			
Does s/he suffer from any medical condition that may necessitate the administration of emergency medicine/treatment on the school premises?			

Has the student ever been referred any outside agency? (i.e. Psycholog Speech & Language Therapist, Occupational Therapist, Social World etc.) If so, please provide copies of these reports to the school. Please list details of any serious meshould be aware.	ogist, orker, of	oncerns	for the student of which the school
Doctor's Name & Address:			
Contact Details:			
student applicant and their pare Code of Behaviour policy and sho	nt/guardian wo	ould conf sonable	nary School, Prosperous, we ask that each irm their acceptance of the school's full efforts to comply with such code by the d into school.
Code of Behaviou	r (Section 4.7	/ Admis	ssion to School Policy)
each student applicant and their p full Code of Behaviour policy and	arent/guardian	n would d easonab	imary School, Prosperous, we ask that confirm their acceptance of the school's le efforts to comply with such code by led into school.
Parent(s) / Guardian(s) signatures	s	Si	tudent signature
Р	ROMOTIONA	AL MAT	ERIALS
permission to include your son/da	•	material	e taken in the school. We would like your should the need arise. Please sign below with this.
permission to include your son/da	ughter in such i	material	should the need arise. Please sign below

CONTACT FROM THE SCHOOL

Please be advised that as part of the school's duties and responsibilities under relevant education legislation, upon the student's enrolment in the school, the school may contact parents/guardians/students in relation to the below:

- Educational progress of the student
- Sports days
- Parent-teacher meetings
- School concerts/events
- School closure (e.g. adverse weather conditions)
- Student's non-attendance or late attendance. The school has a legal obligation to inform parents/guardians by post, as to the attendance record of the enrolled student; TESS (Tusla Education Support Service) will be informed of all absences over 20 days in a school year no matter what reason the absences are for (for example; illness, holiday etc.)
- Student's conduct in school
- Student's social and emotional progress
- Any medical or other issue in the vital interest of the student

The school may also have reason to contact outside statutory and voluntary agencies from time to time to help facilitate student progress, participation and wellbeing. The school will, as necessary, make contact with parents/guardians, if appropriate.

IMPORTANT INFORMATION:

- Please understand that it your responsibility to inform the school of any change in contact information or circumstances relating to the student's application to the school.
- For information regarding how your data is processed by the school and KWETB, please see overleaf.
- Please sign below to demonstrate that you have read and understood this information.

(Parent / Guardian 1)	(Date)	_
(Parent / Guardian 2)	(Date)	_
 (Student)	 (Date)	_

DATA PROTECTION

The Board of Management of St Farnan's PPS is a committee of KWETB, Level 5, Aras Chill Dara, Devoy Park, Naas, Co Kildare. which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer can be contacted at dataprotection@kwetb.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 KWETB 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, or as part of, this Application Form may be communicated internally within KWETB and externally with the NCSE and/or NEPS 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 REVISED 2023. It may also be shared with Tusla Education Support Services for the purpose of assisting the student with education and training opportunities, in line with section 28 of the Education (Welfare) Act 2000.

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 KWETB's Data Retention Policy, which can be found at www.kwetb.ie.

A copy of the full KWETB Data Protection Policy is available at www.kwetb.ie 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 KWETB 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.



