



<u>APPLICATION FORM FOR ADMISSION TO FIRST YEAR - 2025/2026</u>

This is an application form for admission to First Year 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 O'Carolan College				
Completed application	ons will be accepted from:	01/10/2024		
The closing date for r	eceipt of applications is:	22/10/2024		
All Amplication	F			
	n Forms and accompanying ation should be sent to:	For office use only		
O'Carolan College Nobber Co. Meath A82 PK51		Date received://School Stamp:		
Please ensure you attach the following documents to complete the application: Recent proof of address (only registered utility bills for the address dated within the lass three months and in the name of the parent(s)/guardian(s) will be accepted). If applying for the Special Class, a Relevant Report completed within the previous 24 months, containing the mandatory elements set out in the Admission Policy.				
Please complete	e all sections of the following appli	cation using BLOCK CAPITALS		
	SECTION 1 - PROSPECTIVE STUD	ENT DETAILS		
Details of the young person for whom this application is being made.				
First Name:				
Middle Name:				
Surname:				
Date of Birth				
Student Address:				

Eircode:					
PPSN:					

SECTION 2 – DETAILS OF PARENT/GUARDIAN

This section is <u>NOT</u> 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./ Mrs. etc.)		
First Name:		
Surname:		
Address:		
Eircode:		
Telephone no.		
Email address:		
Relationship to student:		

SECTION 3 – STUDENT CODE OF BEHAVIOUR

Please confirm that the Student Code of 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 at www.ocarolancollege.ie or from the school office.

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





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 O'Carolan College

resides in the catchment area. Please note that recent proof of address will be required in support of this. (Only registered utility bills for the address, dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.)					
Address:					
	ident currently has any siblings in this school, please indicate their names rent year of study.				
(i) Name:					
Year:					
(ii) Name:					
Year:					
(iii) Name:					
Year:					
(iv) Name:					
Year:					
C. Please provide the name of the parent/guardian of the student where they are a member of staff of the school.					
Full Name:					

used if F	ovide details of the primary school attended by the student. [This can only be Feeder School is selected under "selection criteria" in the school's n Policy. Delete this instruction.]
School name:	
School address:	
	dent has previously had any siblings in this school, please indicate their nd years of attendance.
(i) Name:	
Year(s):	
(ii) Name:	
Year(s):	
	dent has a parent or grandparent who previously attended the school, dicate their names and years of attendance.
(i) Name:	
Year(s):	
(ii) Name:	
Year(s):	





		S	SECTION 6 – SPECIAL CLASS
	om one or	more of	lege] teaches students who have complex/severe educational the following diagnoses: [Autism Spectrum Disorder, Asperger Syndrome plete if you are applying for the special class.
Please confirm if			
The special class	only: □	<u>OR</u>	The special class and/ \underline{or} the mainstream year group: \Box (Tick this box if you are applying for a place in the mainstream class even if there are no places in the special class.)
elements set ou provided to the special class.	t in the A school wit	dmissior th this A	of the student. A Relevant Report, containing the mandatory Policy, completed within the last 24 months, must also be application Form so as to be considered for admission to the ex/severe special educational need/s of the student:
			4 FOR A RANGE (AND TO THE OREGINAL OF A CO. IN THE STATE OF
SECTION 6A - S	ELECTION	CRITERI	A FOR ADMISSION TO THE SPECIAL CLASS IN THE EVENT OF OVERSUBSCRIPTION
requirements applic	for the spe able secti	ecial cla ion of Pa	determining whether the student meets the admission ss in accordance with the order of priority as set out in the ort B of the Admission Policy for O'Carolan College plete if you are applying for the special class.
resides required	in the car I in suppo he last the	tchmen	nt's address for the purpose of determining whether s/he t area. Please note that recent proof of address will be his. (Only registered utility bills for the address, dated oths and in the name of the parent(s)/guardian(s) will be
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:				
(iii) Name:				
Year:				
(iv) Name:				
Year:				
	provide the name of the parent/guardian of the student where they are a r of staff of the school.			
Full Name:				





IMPORTANT INFORMATION:

- You are required to submit recent proof of address two distinct registered utility bills in relation to the address, dated within the last three months and in the name of the parent(s)/guardian(s).
- If applying for the Special Class, a Relevant Report completed within the previous 24 months, containing the mandatory elements set out in the Admission Policy
- All 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 is your responsibility to inform the school of any change in contact information or circumstances relating to this application.
- For information regarding how personal data is processed by the school and LMETB, please see overleaf.
- Please sign below to demonstrate that you have read and understood this information.

NOTE: Should the student receive a place in O'Carolan 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.

(Parent / Guardian 1)	(Date)
(Parent / Guardian 2)	(Date)
OFFICE	USE ONLY
Date Application Received:	
Checked by:	
Date entered on School Database:	
Entered by:	

DATA PROTECTION

The Board of Management of O'Carolan College is a committee of LMETB, www.lmetb.ie which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for LMETB can be contacted at dataprotection@lmetb.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 LMETB 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 LMETB 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 2018. 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 LMETB's Data Retention Policy, which can be found at dataprotection@Imetb.ie

A copy of the full LMETB Data Protection Policy is available at dataprotection@Imetb.ie

Any person who provides personal data through this Application Form has a right to request access to that data and 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 LMETB 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.