

Scoil Mhuire Community School, Clane, Naas, Co. Kildare

Tel: (045) 868121

APPLICATION FORM FOR 1ST YEAR STUDENTS 2025/2026

Please see our Data Protection Information on our school website www.scoilmhuireclane.ie

Please read the Department of Education & Skills (DES) Personal Data Fair Processing Notice here in relation to personal data we are legally obliged to share with DES <https://www.gov.ie/en/circular/f5adff-fair-processing-notice-to-explain-how-the-personal-data-of-students-/>

STUDENT DETAILS

(PLEASE USE BLOCK CAPITALS)

Student's Full Name

(Forename)

(Surname)

Address:

Eircode:

PPSN:

Nationality:

Date of Birth:

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Gender:

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Prefer not to say

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Mother's Name:

Father's Name:

Mother's Maiden Name:

Correspondence Title:

(addressing correspondence to i.e. Mr & Mrs J Bloggs or other)

Contact Nos: Mother:

Father:

email:

email:

Educational Information:

(Primary School attended)

Autism AS Class

Please tick if applying for AS Class

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Please **only** tick the box if you are applying for the AS Class in respect of students who fall into the following categories: Autism/Autistic Spectrum Disorder, meeting DSM IV/V or ICD diagnostic criteria.

Only applications in respect of students whose needs fall within the category of Special Educational Needs provided for by the Special Class will be considered and have a recommendation that the applicants needs only will be met in a Special AS Class attached to the mainstream school.

If applying for the Special Autism Class, a relevant report completed within the previous 24 months must be included.

Please tick box if including a report

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Do you have other students in Scoil Mhuire past or present?

Yes

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No

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(If yes, please give names and years attended)

Are the above parents/guardians past pupils?

Yes

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No

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Exact address at the time of attending Scoil Mhuire, Clane.

Name:

Years attended:

(Mothers Maiden Name)

(Exact dates required)

Name:

Years attended:

(Fathers Name)

(Exact dates required)

This form must be returned by **3.45pm on Tuesday 22nd October 2024.**

Applications must have

1

Proof of Address

(A recent utility bill, bank statement etc).

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2

Original Birth Certificate.

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3

Where applying for **AS Class**, please enclose relevant report.

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I certify that the above information is correct:

Signed:

Date:

This part of the Application Form must be completed by a father/mother/legal guardian of the 6th class student.
At least one parent/legal guardian must sign the form.