APPLICATION FORM
ST. CLARE'S COLLEGE, BALLYJAMESDUFF, CO. CAVAN

All parts of this form must be completed. Enter NA in sections that are not applicable

Please include a passport size photograph here if it is available

Name of Student: _____ Gender [ ]

Full Address: _____

_____ Eircode: _____

Religion _____ Nationality _____ Language _____ PPSN _____

Ethnicity and Cultural Background _____

Medical Card Yes [ ] No [ ] _____

Date of Birth _____/_____/_____ **Please present original copy of Birth Certificate to the College**

	Names	Mobile Phone Number	Home Phone Number	Work Phone Number	Email Address
Mother's Name					
Maiden Name					
Father's Name					
Guardian If applicable					

Please tick the mobile phone number you wish to nominate for text alerts

Primary School or Previous Second Level School attended _____

Phone Number of previous school _____ Number of years completed in that school _____

Please tick which Year Group you are applying for in this School: 1st [ ] 2nd [ ] 3rd [ ] TY [ ] 5th [ ] 6th [ ]

Criteria for Enrolment

Does the applicant live within the School's Catchment Area? Yes [ ] No [ ]

Have brothers or sisters already attended the school? Yes [ ] No [ ]

Does either parent work in the area? Yes [ ] No [ ]

Did either parent attend the school? Yes [ ] No [ ]

Distance from home to St. Clare's College in miles _____

Please note that photographs of students may be taken from time to time. These are used only for identification or the positive promotion of the individual student or the College. Parents should indicate to the College if they disagree with this practice. Data Protection legislation requires that Parents / Guardians be informed that the information provided in this form may, in certain circumstances, be disclosed to outside bodies such as the DES, the HSE, the Gardai and the EWB.

DECLARATION

We have read and understand the School's Admission Policy and agree to respect the characteristic spirit of the school.
We have read and fully accept the Code of Behaviour of St. Clare's College.

Student's Signature: _____

Parent/Guardian Signature: _____

Date of submission of this application ____/_____/_____

Continued over >

STUDENT TRANSFERRING FROM ANOTHER SECOND LEVEL SCHOOL

Transfer form will need to be completed:

In the space below please list the subjects the student studied in his/her previous second level school:

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____

MEDICAL CONSENT

In the event of an accident or serious illness, the school will attempt to contact parents/guardians. If we fail to contact you we may need to take your child to the local doctor/hospital. To allow us to do this, we need your permission; therefore we would be grateful if you sign the permission slip below.

Permission

If I am unavailable I give permission to St. Clare's College to take my son/daughter to a doctor/hospital in the event of an accident.

Yes ☐ No ☐ Parent/Guardian Signature: _____

Family Doctor:_____ **Phone Number**_____

Please indicate if you son / daughter has any of the following conditions and if special arrangements are needed for the administration of medicine: -

Asthma ☐ Other ☐ Allergies ☐

Epilepsy ☐ please specify _____

Diabetes ☐ please specify _____

CUSTODY

Please supply details of any custody or legal arrangement relating to this student

EDUCATIONAL NEEDS - LEARNING SUPPORT

Does your son/daughter have Special Educational Needs Yes ☐ No ☐

Was your son/daughter given consideration for Special Needs or Learning Support in Primary School? Yes ☐ No ☐

Give details _____

Diagnosed condition - if any - _____

Name of Special Needs Contact Person in previous school _____

Were resource hours available in his /her previous school? Yes ☐ No ☐

If a psychological report is available please submit it to the College with this form.

THIS BOXED SECTION IS FOR COLLEGE USE ONLY

A College representative met with above Student along with his / her Parent/ Parents /Guardian ----------

The Principal/ Deputy Principal has viewed an original **BIRTH CERTIFICATE** ----------

All **other documentation** for this student has been supplied as required by the Admissions policy ----------

This **ENROLMENT FORM IS NOW COMPLETED** in full ----------

Parents and Student have read and accept the **Code of Behaviour** along with its Rules, Procedures and sanctions --

MEDICAL CONSENT/ SPECIAL NEEDS and **Photograph Statement** have been brought to the parent's attention ------

On behalf of St. Clare's College I wish to record the date of acceptance of this enrolment application below.

Date of acceptance of this enrolment application _____ /_____ /_____ Signed _____

St. Clare's College
Forms Privacy Notice
(effective 25th May 2018)

Who is collecting the data
St. Clare's College
Virginia Rd,
Kilmore,
Ballyjamesduff,
Co. Cavan.
T: 049 854 4551

This Privacy Notice governs the manner in which St. Clare's College collects, uses, maintains and discloses information collected using school forms.

Personal Identifiable Information (School)
We collect personal identification information from prospective students & staff in a variety of ways in connection with the delivery of education at our school. We will collect personal identification information from data subjects only if they voluntarily submit such information to us:

Student's Data (Lawful Basis: Public Interest, Consent, Legal Obligation):

- Name; Surname; Date of Birth; PPS Number; Address; Nationality; Country of Birth; Medical Conditions; Programme Subjects & Courses Exemptions; Medium of learning Irish/English; Psychometric Testing Results (where applicable); Psychological Assessment Results (where applicable); Book Rental Scheme; Transportation Scheme;
- Parent / Guardian Name; Phone Number; Home address; Mobile Number; Emergency Contact Person & No., Email, Mothers Maiden Name; Family Members (current / past); Medical Card;
- Name, Address & Tel. No. of GP, Previous Educational History.
- Photos with classmates, tours, matches, awards etc.
- Classroom based assessments and exam results;
- State Examination Results;

How we use collected information
Our privacy statement is very simple. If you share data / information with us (St. Clare's College, a Data Controller), it will remain with us. It may be passed onto authorised third parties i.e. Department of Education & Authorised Service Providers. We will retain and process your personal data to deliver education at our school in the Public Interest.

How we protect your information
We adopt appropriate data collection, storage and processing practices and security measures to protect against unauthorised access, alteration, disclosure or destruction of your personal information.

How long do we keep your personal information?
We keep your personal information for a length of time as per our Retention Policy i.e. For students, this generally means we will retain data for up to 7 years after a student has left the school. After this time, your data will be destroyed by confidential shredding our deletion from our school's database.

In certain circumstances we may retain your data longer, these circumstances and the retention period are outlined in St. Clare's College Data Protection Policies.

Sharing your personal information
We do not sell or trade personal identification information to others. It may be shared with authorised third parties i.e. Department of Education & Authorised Service Providers in the delivery of our obligations as a school.

Your rights
You have a number of rights in relation to your personal information. These rights include the right to:

- request information regarding the personal data that we hold about you and the source(s) of that information. You can request a copy of any personal data we hold about you. This service is free of charge.
- request that we rectify without undue delay any inaccuracies in relation to the personal data we hold;
- in some circumstances, request the erasure of your personal data or object to the processing of your data;
- obtain restriction of processing in some circumstances;
- object to any processing in some circumstances;
- in some circumstances, request that your personal data be transferred to you or a new school if the data is processed automatically (Please note, that we retain only a copy of certain data collected from you. Furthermore we do not avail of systems that make automated decisions based on your data);
- if we are processing any data for which you have given consent, you may withdraw consent to us processing your personal data. This will not affect the processing already carried out with your consent; and
- lodge a complaint with a supervisory authority. In Ireland, this is the Office of the Data Protection Commissioner;

Any enquiries regarding the above rights or if you wish to exercise any of these rights or any other rights provided for in this Statement please contact us.