



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 Peter's College.

Completed 1st Year applications will be accepted from:	Tuesday, 1st October 2024 @ 9AM
The closing date for receipt of 1 <sup>st</sup> Year applications is:	Tuesday, 22 <sup>nd</sup> October 2024 @ 4PM

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

2 Recent proof of address (only registered utility bills Electricity/Gas or bank statements

dated within the last 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 Admissions Policy.

Please tick	the Year Group t	he studer	nt is applying to enter:	
*LCA = Leavi	First Year Second Year Third Year ng Certificate Applied		Transition Year Fifth Year L.C.A.* (Fifth Year)	Sixth Year L.C.A.* (Sixth Year)
Special Class 19 <sup>th</sup> May 20	s, will only be proces	sed from t ceived aft	he <b>28<sup>th</sup>April 2025</b> - closir er this date will be co	Peter's College other than to the ng date for receipt of applications nsidered and processed as late

#### NAME OF APPLICANT (STUDENT)

All Application Forms and accompanying documentation should be sent to:	For Office Use only
	Date received:
	Checked by:
Admissions Office St Peter's College Dunboyne Co. Meath A86 W864	In the event of oversubscription:
	No on Waiting List:





#### 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:					
Surname:					
Student Address:					
EIRCODE:					
PPSN:					
Date of Birth: (optional)					

SECTION 2 – DETAILS OF PARENT(S)/GUARDIAN(S)			
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	
First Name:			
Surname:			
Address:			
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 found at <u>www.stpeterscc.ie</u> or from the school office.

Ι.

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.

#### SECTION 4 – SPECIAL CLASS (AN CHRANNÓG)

The special class, An Chrannóg in St Peter's College teaches students who have complex/severe educational needs arising from one or more of the following diagnoses: Autism Spectrum Disorder, Asperger Syndrome...

Please <u>ONLY</u> complete if you are applying for the special class.

Please confirm if this application is being made for:

The special class, An Chrannóg only: 🗆

OR

The special class, An Chrannóg and/<u>or</u> the mainstream year group:

Where the student is seeking a place in the special class An Chrannóg, please provide details below of the complex/severe educational need(s) of the student. A Relevant Report, containing the mandatory elements set out in the Admissions Policy, 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 An Chrannóg.

Please set out the details of the complex/severe special educational needs





#### 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 St Peter's College.

A. Please confirm the student's address for the purpose of determining whether s/he resides in the catchment area. Please note that 2 recent proofs of address will be required in support of this. (Only registered utility bills Electricity/Gas or bank statements dated within the last three months and in the name of the Parent(s)/Guardian(s) will be accepted.)

Address:	

B. If the student currently has any siblings at St. Peter's College, please indicate their names and current year of study.			
(i) Name:			
Year:			
(ii) Name:			
Year:			
(iii) Name:			
Year:			

C. Please pro	ovide details of the primary school attended by the student.
School name:	
School Address and Roll No:	





## **IMPORTANT INFORMATION:**

- You are required to submit 2 recent proof of address only registered utility bills ELECTRICTY/GAS or bank statements dated within the last 3 months and in the name of the Parent(s)/Guardian(s) will be accepted.
- If applying for the Special Class, An Chrannóg, a relevant report completed within the previous 24 months, containing the mandatory elements set out in the Admissions Policy.
- 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 LMETB, please see overleaf.
- If you are posting the application form please retain a proof of postage and contact the school at <u>stpeterscollege@lmetb.ie</u> if you do not receive an emailed receipt of application confirmation by 24<sup>th</sup> October 2024, please contact school office. If you are handing in the application form please ensure that you receive a receipt of application confirmation from the office. ONLY OFFICE STAFF CAN ISSUE THIS RECEIPT.
- Please sign below to demonstrate that you have read and understood this information.

**NOTE:** Should the student receive a place in St Peter's 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)
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#### DATA PROTECTION

The Board of Management of St Peter's College is a committee of LMETB, Abbey Road, Navan, Co. Meath which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for LMETB is Sinead Barry and can be contacted at dataprotection@Imetb.ie.

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

- 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 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, and/or the Department of Education, 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 LMETB's Data Retention Policy, which can be found at <u>www.lmetb.ie</u>

A copy of the full LMETB Data Protection Policy is available at<u>https://www.lmetb.ie/wp-content/uploads/sites/21/2018/05/LMETB-Data-Protection-Policy-17-May-2018.pdf</u> 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 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.