

Coláiste Iósaef

Kilmallock, Co. Limerick



Phone: 063 98275

Fax: 063 98753

Email: office@cik.ie

Website: www.cik.ie

First Year Enrolment Form 2018/2019

INFORMATION FOR PARENTS

A separate Application Form must be completed for each child enrolling. The application should be fully completed and returned to the school office with a photocopy of the pupil's birth certificate or passport, one passport photo and any relevant medical or specialist reports.

Part of this application is a non-refundable placement booking fee of **€70**, this amount will be the only administration cost for 2018/19 First Year students and will cover all expenses such as Student academic profiling, Student Journal, School App, Lockers, Insurance, Miscellaneous expenses, photocopying, etc. Enrolment is not complete without the attached amount.

The closing date for completed Application forms is Friday 27th of October 2017.

If a pupil has any disability or special educational need, please state them below including information about support measures which have already been provided in primary school. Please enclose all relevant documentation such as medical or educational psychological reports, details of resource hours provided in primary school or any other pertinent information. Please be assured that this information does not affect entry to the school.

Please note there is a maximum enrolment limit of 80 students per year group. These places will be allocated following the school enrolment policy and on a first enrolled basis.

Student's Details (PLEASE USE BLOCK CAPITALS):

Surname: _____ First Name: _____

Home Address (where student lives) _____ Second Address (if relevant) _____

_____ Date of Birth: _____

Home Tel No: _____

Student's Gender: Male Female No. of Children in Family: _____

Student's Position in Family: _____ Student's County of Birth: _____

Name/s of sibling/s in Coláiste Iósaef at present: _____

If student is from outside Ireland, when did his/her education in Ireland begin? _____

Student's Public Personal Service (PPS) Number: _____

If you do not know your son's/daughter's PPS number, you can contact the local Social Welfare Office (now known as **Intreo Centre Limerick**).

Health Details:

Family Doctor: _____ Phone No: _____

Details of students medical history (where relevant):

Present Primary School Details:

Name of Present Primary School: _____

Name of School Principal: _____

Learning Support:

Does your child have a diagnosed difficulty? _____

If yes, please give details and include reports as appropriate: _____

Does your child have an assessment? _____

If yes, please give details and include reports as appropriate: _____

Has your child received learning support in primary school? _____

If yes, please give details and include reports as appropriate: _____

Has your child received language support or support from an SNA in primary school? _____

If yes, please give details: _____

Irish and/or Language Exemption

Does your child have an official exemption from Irish and/or languages? _____ If yes, please include letter of exemption. This letter is available from your Primary School.

Student's Hobbies and Interests:

Parent(s)/Guardian(s) Details

Father's Name: _____ Mother's Name: _____

Occupation: _____ Occupation: _____

Work No: _____ Work No: _____

Mobile No: _____ Mobile No: _____

Mother's Maiden Name: _____

Medical Card Holder: YES NO

Medical Card Number: _____

Please note: In giving this mobile number, you are agreeing to it being used as a contact number.

Mobile Number for school text messages: _____

Email address: _____

Please print clearly the name/s and address/s for school correspondence to be issued:

Please give details of the person to contact in the event that neither of the above is contactable:

Name: _____ Contact No: _____ Relationship to Student: _____

- (1) All enrolments are subject to approval by the college Board of Management
- (2) An acknowledgement/receipt will be issued for applications received the week beginning Monday 20th of November 2017.
- (3) Parent(s)/Guardian(s) who have not received an acknowledgement by Friday 24th of November are advised to contact Coláiste Iósaef.

Parent(s)/Guardians Signatures:

Father: _____ Mother: _____

Students Signature: _____ Date of Application: _____

Return To:
Mr. Noel Kelly
Principal,
Coláiste Iósaef
Kilmallock
Co Limerick
Phone: 063-98275
E-mail: office@cik.ie

IMPORTANT: Please include the following:

- (a) Copy of student's Birth Certificate or Passport
- (b) Enrolment Fee of €70 Cash or Cheque (payable to Coláiste Iósaef)
- (c) A Passport size photograph of the Student

Note:

Applications may not be processed unless accompanied by all of these items.

All Forms should be returned before Friday 27th of October 2017.

OFFICE USE ONLY

Date Received: _____ Admission No: _____ Fee Paid: € _____ Place offered YES/ NO